

2003

HIV/STD Prevention &
Community Planning

Epidemiologic Profile for North Carolina

Epidemiology & Special Studies Unit
HIV/STD Prevention & Care Branch



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Preface

This report, *2003 HIV/STD Prevention & Community Planning Epidemiologic Profile for North Carolina*, is an expanded version of previous reports. This report incorporates information from other reports to present a more comprehensive report for not only HIV but other sexually transmitted diseases as well. It is hoped that this new expanded format will be more helpful to community planning groups and others in public health in designing and implementing effective prevention programs. This publication, along with other reports, is available at <http://www.epi.state.nc.us/epi/hiv/surveillance.html> .

Tables presenting reports by year are intended to be reports by date of receipt in the Epidemiology and Special Studies Unit office rather than by date of diagnosis, unless otherwise noted. In some instances, total numbers of reports may not agree between separate cross-tabulations due to missing values for some variables. Rates in this publication are presented for several categories of race/ethnicity, age groups and gender for each disease as well as for different geographic designations. Demographic rates presented in this publication were calculated using population estimates that were available in March 2002 from the U.S. Census Bureau. Rates for the years 1997 – 1999 are based on the estimates that used the 1990 census as a reference. However, the demographic rates for 2000 and 2001 used the 2000 census populations. Estimates for the years between 1990 and 2000 that are adjusted for the 2000 census were unavailable at press time. Thus, the rates over time may vary considerably for certain racial/ethnic groups because the denominators are based on different census years. Considerable differences may be noted for Hispanic and American Indian rates over time, since their population estimates changed significantly with the new census. Therefore, the interpretation of trends over time for certain demographic groups is subject to some error at this time. Rates presented for counties and regions in the state are based on population estimates and projections available in March 2002 from the N.C. Office of State Planning (Demographic Unit). All rates presented in this document are referenced as to source on each page. Readers should take note. In general, rates should be viewed with caution. This is especially true of rates that are based on small numbers of cases (generally fewer than 20), because these rates have large standard errors and confidence intervals that can be wider than the rates themselves. Thus, it is important to keep in mind that rates based on small numbers of cases should be considered unreliable. For a more complete discussion of rates based on small numbers, please see the North Carolina Center for Health Statistics's publication, Statistical Primer No.12 "Problems with Rates Based on Small Numbers" by Paul Buescher. This publication is available at the web site, <http://www.schs.state.nc.us/SCHS/>

Please direct any questions or comments about the *2003 HIV/STD Prevention & Community Planning Epidemiologic Profile for North Carolina* to:

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Epidemiologic Profile for HIV Prevention and Community Planning

I. INTRODUCTION

“AIDS (acquired immunodeficiency syndrome) is a severe, life-threatening clinical condition, first recognized as a distinct syndrome in 1981. This syndrome represents the late clinical stage of infection with the human immunodeficiency virus (HIV), which most often results in progressive damage to the immune and organ systems, including the central nervous system.” (Benenson, A. 1995. *Control of Communicable Diseases Manual*. 16th Edition. Washington, D.C. APHA)

The 2003 version of North Carolina's Epidemiologic Profile of HIV/AIDS continues the description of the HIV epidemic among the various populations in North Carolina. As in previous versions, the majority of the data presented are drawn from the surveillance systems maintained by the HIV/STD Prevention and Care Branch. We have attempted to integrate other appropriate data sources in the analysis and discussion presented.

The information in this year's profile is organized a little differently than the previously year's in an attempt to make the information more readable and more useful. We have addressed following questions:

1. What are the sociodemographic characteristics of the population?
2. What is the impact and geographic distribution of HIV/AIDS on the population?
3. What is the risk for becoming infected with HIV?
4. What are the implications of AIDS in North Carolina?

This document seeks to add information to the existing knowledge base concerning HIV incidence in North Carolina. In order to produce an accurate profile, it is critical to consider data limitations when evaluating identified trends and patterns. Data collection systems vary in completeness and relevancy. Also, caution must be exercised when extrapolating trends from reported cases to the population at large. Data regarding AIDS and HIV positive cases reported in this profile are from the HARS (HIV/AIDS Reporting System) surveillance system maintained by the Epidemiology and Special Studies Unit, HIV/STD Prevention and Care Branch. AIDS became reportable in North Carolina in 1984, and HIV infection was made reportable by name in 1990.

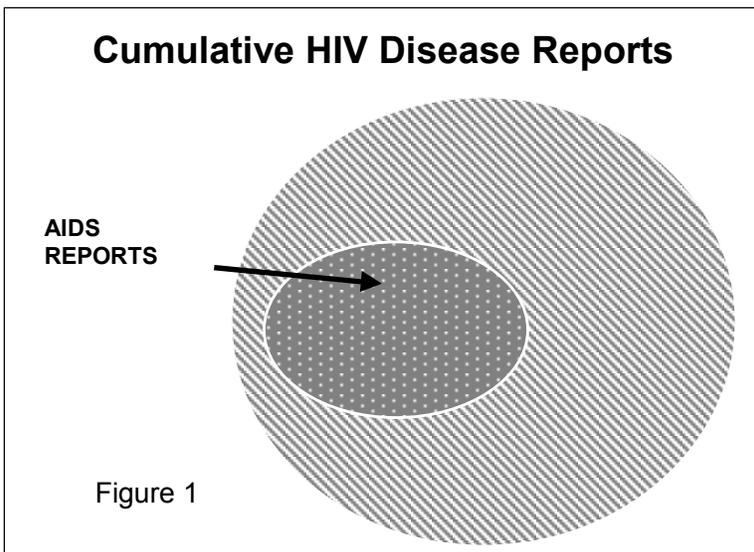
While AIDS cases reflect the HIV infections that occurred in earlier years, examination of trends in AIDS cases can draw attention to aspects of the epidemic. The impact of treatment advances has delayed the progression from HIV to AIDS and from AIDS to death. This pattern has been demonstrated to some extent in our surveillance data. Thus, “from 1996 on, cases of AIDS and deaths will provide a valuable measure of the continuing impact of treatment, as well as describe populations from whom treatment is either not accessible or not effective.” (CDC, 1998, *Trends in the HIV & AIDS Epidemic*, Atlanta, GA.)

A significant portion of both AIDS and HIV cases are reported without an identified transmission mode. Many of these cases have been investigated but do not meet the criteria to be reported as one of the CDC-defined risk categories. Amendments of existing categories and/or additional categories are needed to facilitate identification of trends and patterns in North Carolina's epidemic. Historically (for the nation) the largest proportion of male cases initially reported as *no risk identified* were later reclassified as *male to male sexual contact*, followed by *injecting drug use* and *heterosexual contact*. Most female cases initially reported as *no risk identified* are generally reclassified as *heterosexual contact* followed by injecting drug use. However, anecdotal data from North Carolina indicates the increasing numbers of cases reported with no specified risk may be the result of heterosexual transmission (which includes individuals who reported multiple heterosexual partners and exchange of sex for drugs and/or money). The extent to which analysis of trends in AIDS/HIV exposure categories is compromised by the large proportion of cases reported with no risk identified depends on the extent to which AIDS/HIV transmission is changing over time.

The discussion of HIV, or what is HIV disease?

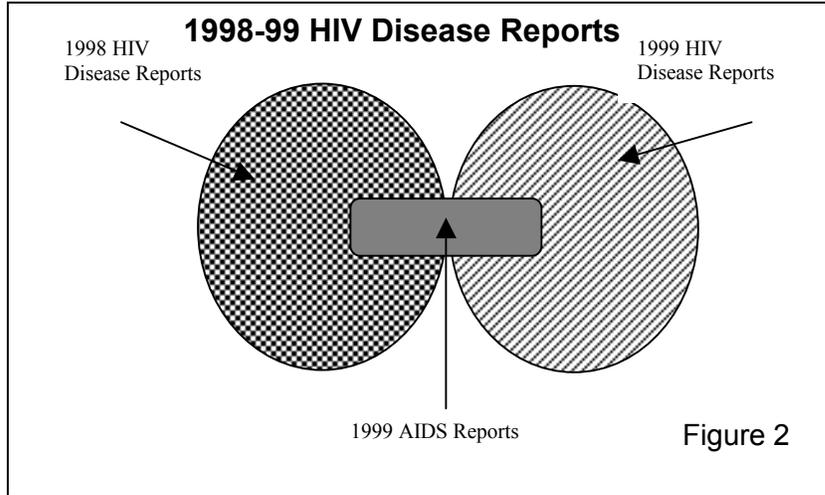
In this profile we will attempt to simplify the discussion of the HIV epidemic in North Carolina by combining much of the available HIV and AIDS surveillance information into a single group of reports called "HIV disease". This larger data set enables us to better describe the HIV epidemic over time. While it is important to examine all reports of infected individuals together, we must be consistent with the reference to time of report. This issue is somewhat difficult, because our reporting for this disease has changed over time; however, for this profile we have defined a date category, "year of first report," that sorts all reports by the date the **individual** was first reported to the surveillance system.

Thus, for our discussion in this profile, *HIV disease* references all reports by date of *first report for the individual*. For most *HIV disease* reports, this new report date is determined from the date of an HIV infection report, but for some reports, it is based on



the date of report for an AIDS diagnosis because the infected individual was never reported with an HIV infection without an AIDS-defining condition present. The first report for that person was an AIDS diagnosis and represented a new incident case of an HIV infected individual at that time. *HIV disease* also includes early surveillance reports of individuals when AIDS surveillance was the

only reporting of infected individuals (all reports before 1990) by referencing the AIDS report date. The reference of age for *HIV disease* is based upon the age at the diagnosis of first report. Therefore, the category “HIV disease” can be used to examine all reports of all infected individuals based upon the earliest report date and the information we have for an individual. This new category better reflects recent changes in trends for the epidemic and provides us with a single category of disease.

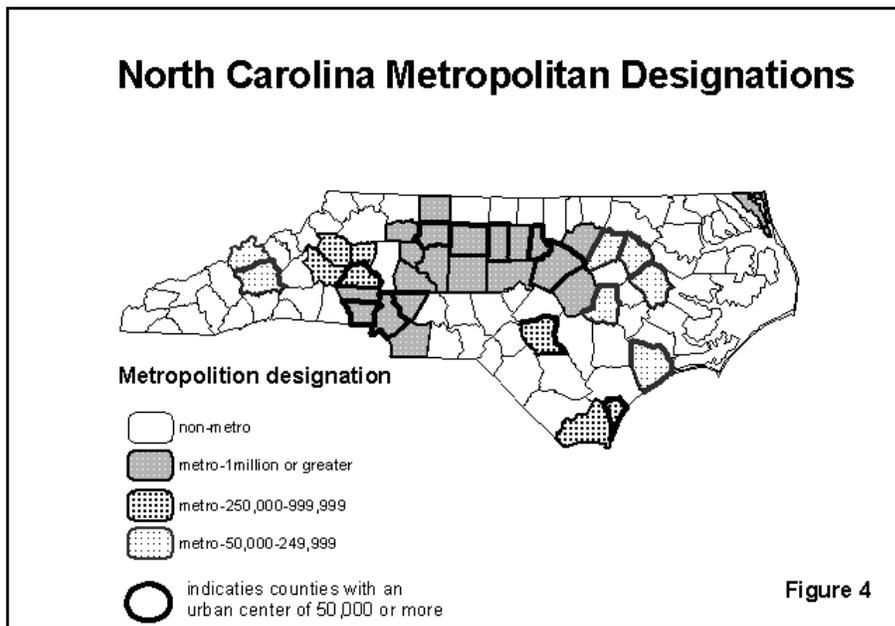
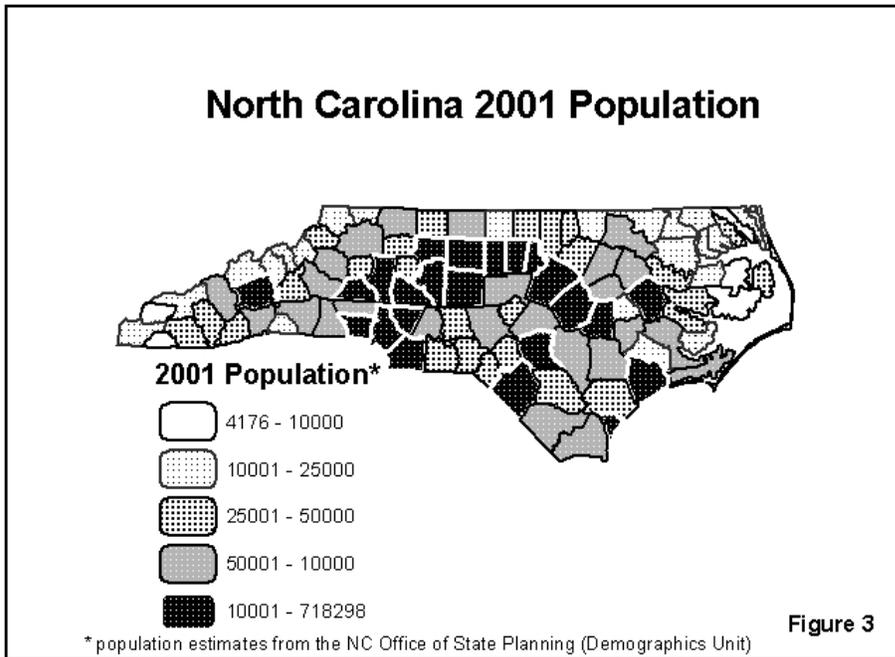


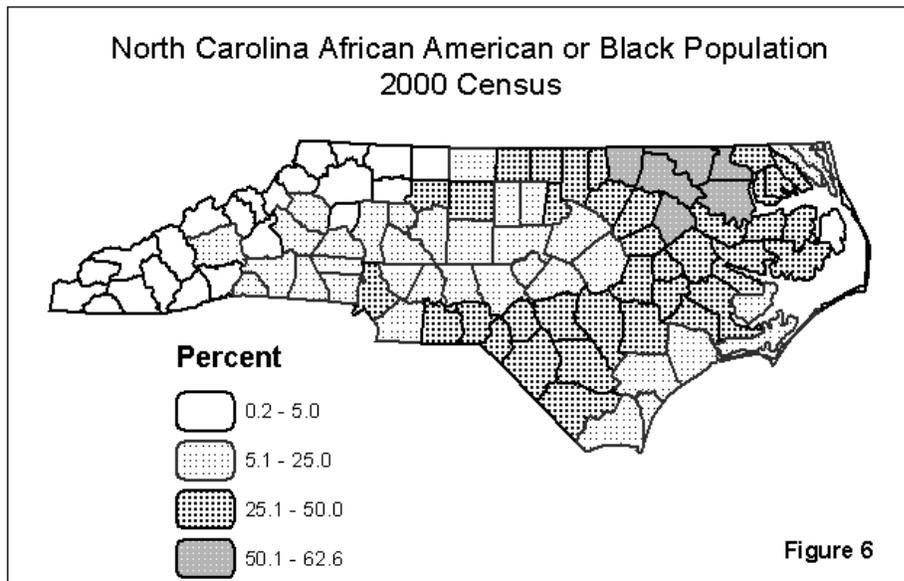
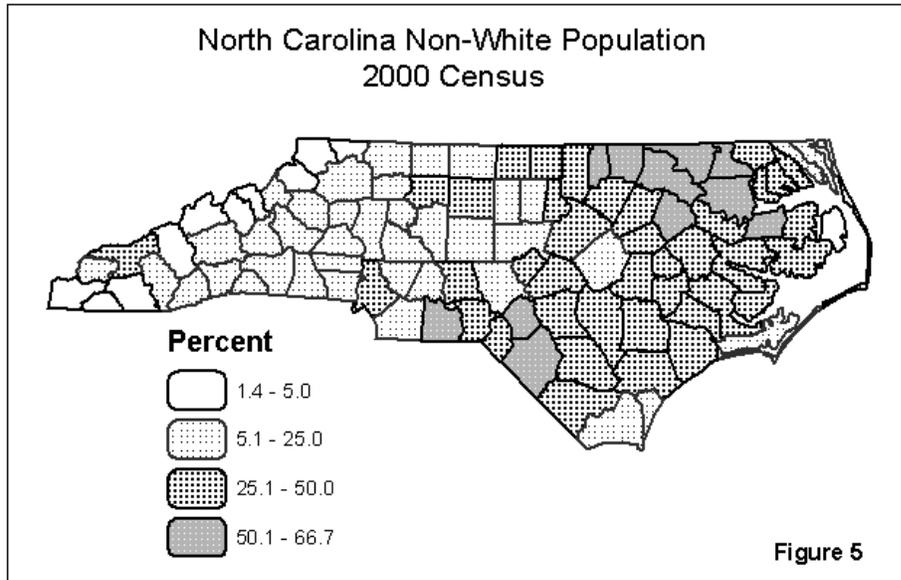
The discussion of AIDS cases is essentially a subset of *HIV disease* reports since by definition all AIDS reports are included, but the report date is different for the two. See Figures 1 and 2 for a visual representation of *HIV disease* and AIDS reports categories.

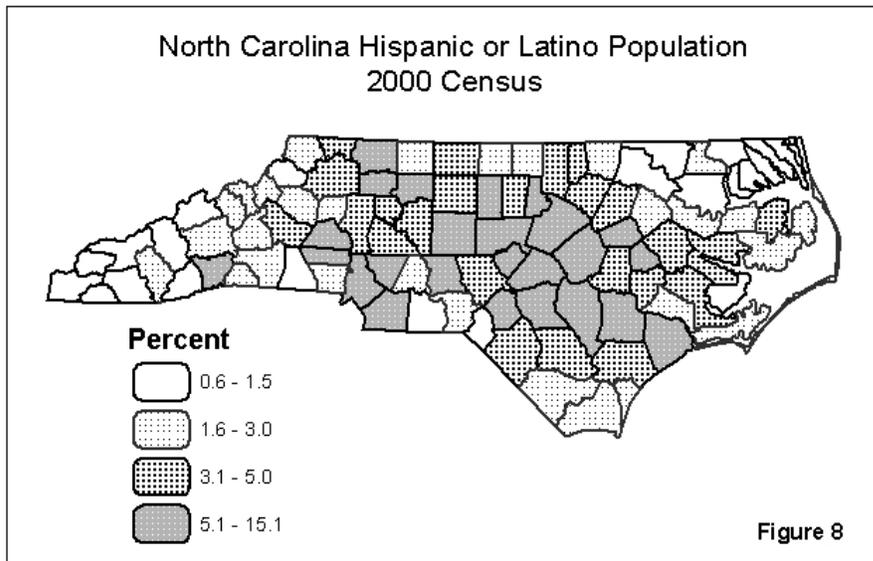
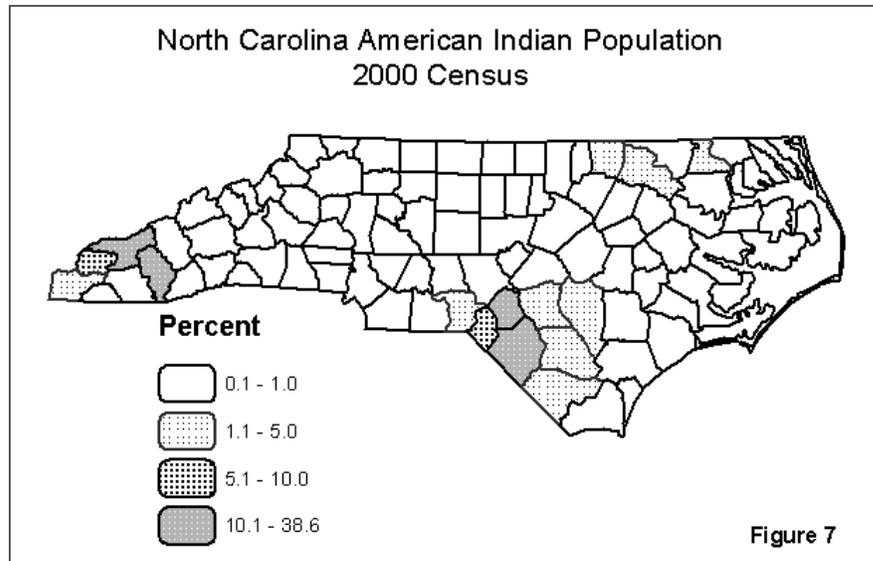
For AIDS reports, the date of report is based upon when the person was reported *with an AIDS diagnosis* (usually a later date than date of first report). The reference of age will also be different, based on the age when the AIDS diagnosis was made. AIDS cases are presented in the same way as they have been presented in earlier surveillance publications. Some AIDS information may be presented by the date of diagnosis rather than by the date of report. When this occurs, it will be labeled as such.

II. SOCIODEMOGRAPHIC CHARACTERISTICS OF NORTH CAROLINA

According to the 2000 federal Census, the United States population grew by 13.4% from 1990. During this same period, North Carolina's population grew by 21.4%, ranking it 9th in percentage growth among the states and 6th in the number of persons added. North Carolina is ranked as the 11th most populous state. The 2000 Census also recorded substantial growth in North Carolina metropolitan areas. Metropolitan areas (MAs) are defined by the U.S. Office of Management and Budget (OMB) as areas with specific social and economic links that have a central city of at least 50,000 persons. The OMB metropolitan/non-metropolitan designation recognizes commonly used political boundaries such as “counties”; the designation applies to the entire county. MAs can be subdivided into areas of different sizes based on population. Current North Carolina population estimates and defined metropolitan areas are displayed in Figures 3 and 4. In percentage growth, four North Carolina areas were found among the top 50 growth metropolitan areas in the United States: Raleigh/Durham/Chapel-Hill ranked 12th; Wilmington ranked 14th; Charlotte/Gastonia/Rock Hill ranked 26th; and Greenville ranked 40th. In numerical population change, three metropolitan areas ranked among the top 50







in the country: Charlotte/Gastonia/Rock Hill; Raleigh/Durham/Chapel-Hill; and Greensboro/Winston-Salem/High Point. The designation of metropolitan areas versus non-metropolitan areas is commonly used as a delineation of urban and rural by many government agencies, including the Centers for Disease Control and Prevention. It should be noted, however, that there are other definitions of urban versus rural areas. For example, the U.S. Census Bureau has definitions based in part on person density. In that case, individual counties may contain both urban and rural components. The U.S. Census Bureau does prepare ranking of the states by applying its rural and urban definitions to individual households. For these reasons, we have chosen not to address the issue of rural vs. urban designations in this document. New Census Bureau rankings of rural/urban households of the states based on the 2000 Census are not due to be available until late in 2002. It should be noted that at the time of the 1990 census (for the first time in history), over half of the North Carolina population was classified as urban (Census Bureau), but it ranked third behind Pennsylvania and Texas in the number of rural residents. For more information on the Census Bureau's rural versus urban definitions, please visit its web site, <http://www.census.gov/>.

Also according to the 2000 Census, over half of North Carolina's population lives in only sixteen of the state's one hundred counties (Mecklenburg, Wake, Guilford, Cumberland, Forsyth, Durham, Buncombe, Gaston, New Hanover, Onslow, Davidson, Catawba, Pitt, Carbarus, Randolph, and Alamance). Population projections from the N.C. Office of State Planning for 2001 listed five counties with a population under 10,000 (Clay—8,973, Graham—8,097, Camden—7,003, Hyde—5,872, and Tyrrell—4,126). Figure 3 displays the population distribution among the counties in North Carolina.

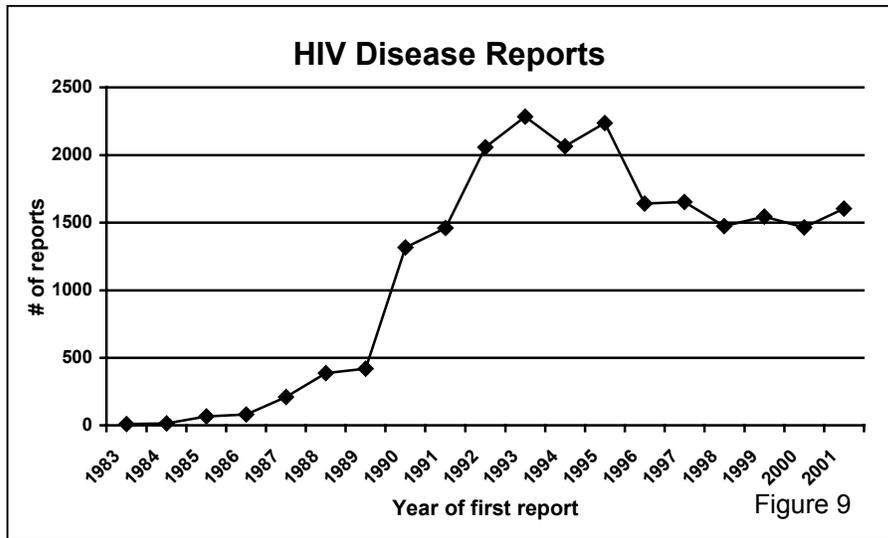
North Carolina has the 7th largest non-White population (2,141,397) in the United States. In 2000, the population of 11 counties was more than 50% non-White (Robeson—66.7%, Bertie—63.5%, Hertford—62.2%, Warren—60.8%, Northampton—60.7%, Edgecombe—59.7%, Hoke—54.5%, Halifax—57.1%, Vance—51.4%, Washington—51.4% and Anson—50.2%). Figure 5 displays each county's non-White population as a percentage of the total population. Figures 6 and 7 display each county's proportion of African Americans/Blacks and American Indians. Figure 8 displays each county's proportion of Hispanic population in 2000. In 2000, North Carolina had the 15th largest Hispanic or Latino population in the nation. Duplin County had the highest proportion (15%) of Hispanic residents, followed by Lee County with 11.7%, Sampson County with 10.8%, and Montgomery County with 10.4%.

North Carolina has both a relatively low per capita income and low unemployment rate. These two statistics suggest that, while many citizens are employed in North Carolina, they work at low-paying jobs. According to the U.S. Department of Commerce's Bureau of Economic Analysis, the per capita income (preliminary) for 2000 in North Carolina was \$27,418 or 91% of the national average of \$30,271. This places North Carolina 33rd in the U.S. for personal per capita income and 4th in the Southeast.

III. THE IMPACT OF HIV ON THE POPULATION

HIV Incidence

Although HIV surveillance reports do not indicate the true incidence of all new infections since not everyone who is infected is tested and reported, it is important to follow the reporting trends to estimate whether incidence is increasing or decreasing. From the early 1980s through December 31, 2001, the HIV/STD Prevention and Care Branch received a total of 21,993 N.C. *HIV disease* reports. Figure 9 shows all cases (HIV& AIDS) reported, by year of first report for the individual. The addition of HIV infection reporting in 1990 accounted for the dramatic increase in reports beginning at that time. The number of cases reported was highest from 1992 through 1995, but some of this spike in reporting was probably a result of better reporting from providers due to enhanced awareness about HIV/AIDS issues. This likely occurred because of the implementation of HIV infection reporting, changes in the AIDS case definition, and/or as a result of enhanced active surveillance activities by Branch staff. Thus this 1992 – 95 spike was at least in part a likely reflection of prevalent cases being reported rather than an indication of true increases in new cases. An interesting correlation to note is that 1992 was the peak year for HIV seropositivity among women who gave birth in North Carolina (data from the Survey in Childbearing Women) and was also the peak year for syphilis cases reported in North Carolina. The number of new *HIV disease* reports per



year has been relatively stable since 1996. Reporting by type of initial case has been fairly consistent since the mid 1990s. Roughly 30% of new individuals reported each year with *HIV disease* also represented new AIDS cases (Table 1, pg. 45).

HIV/AIDS-related deaths

Unlike chronic diseases with high death rates such as cancer or cardiovascular diseases, AIDS is a killer of the young and middle-aged. The case fatality rate for the cumulative HIV/AIDS reported cases is 51%, however for those cases diagnosed and reported before

1990, that rate is 88%. Unfortunately, there are several cases where we only learn of the diagnosis at the time the person dies.

The data reported in this section of the profile were collected by the North Carolina Center for Health Statistics. Mortality data are coded from death certificates collected by the state's registrars. Reporting is nearly 100% complete, as death certificates are required for every death in North Carolina. However, the causes of death are based on information recorded by the certifying physician and may be inaccurate or incomplete. Due to under-reporting of certain causes of death, the number of HIV-related deaths and the spectrum of related conditions will be underestimated to some extent. AIDS had increased in ranking as a cause of death among 15-44 year olds in North Carolina through the mid 1990s, but recently, AIDS has declined in overall ranking of causes of death for this age group (Figure 10). In 2000, there were 302 AIDS deaths recorded for 15-44 year olds in North Carolina, which was slightly more than in 1999 (285). From 1995 to 2000, there was a 61% decrease in AIDS-related deaths (776:302) for this age group. The decrease was greater for Whites (77%) than for African Americans (52%). It should be noted that coding for deaths changed in 1999 to ICD-10 (International Classification of Diseases). This new scheme allows for more deaths to be better coded and correctly associated with causative disease. HIV- and AIDS-related deaths are now better represented in the new coding. Thus the decrease in deaths for 1999 and 2000 for HIV/AIDS is understated in Figure 10 as it relates to the earlier years. Deaths from earlier years should be adjusted for a truer comparison to 1999 and 2000 deaths.

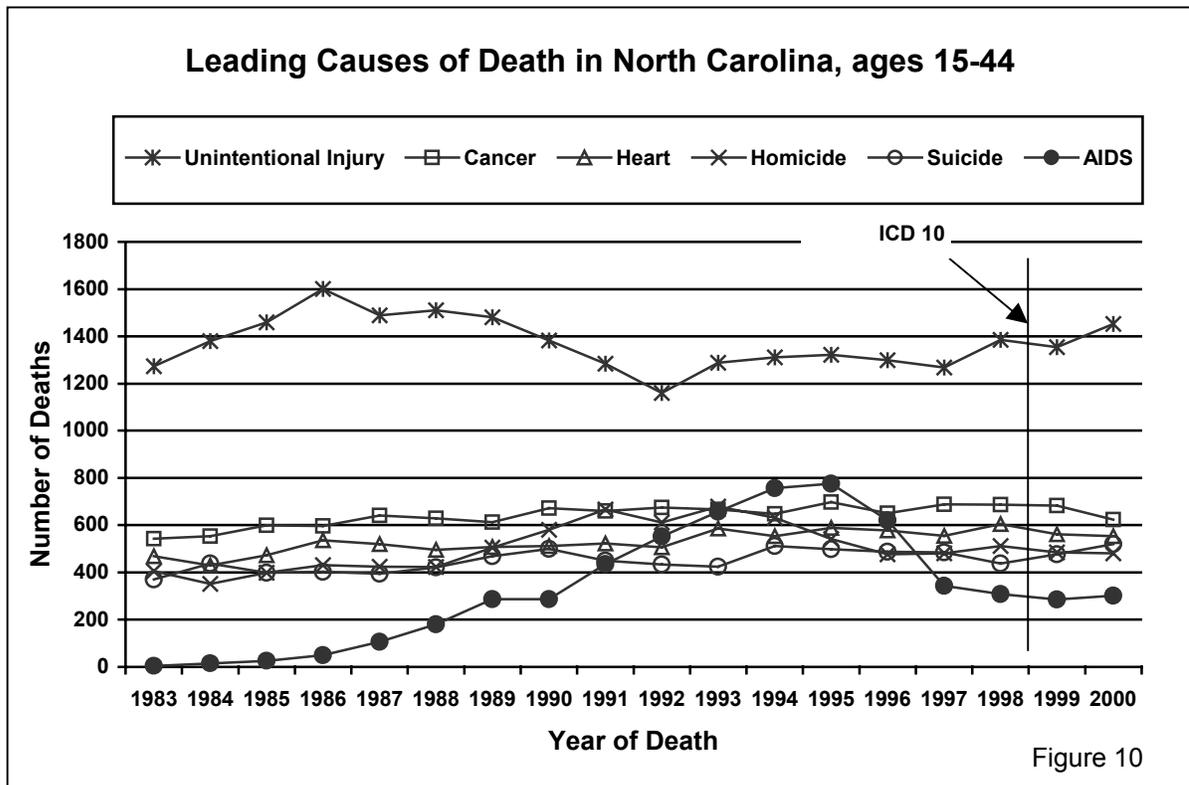


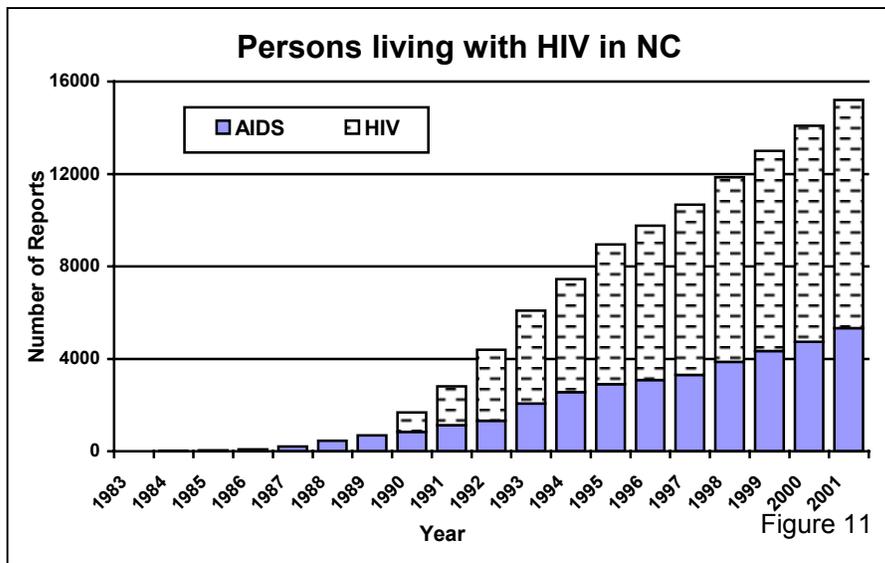
Figure 10

HIV Prevalence

As stated earlier, the cumulative number of *HIV disease* cases reported through December 31, 2001 was 21,993, of whom 6,786 have died or have an unknown vital status. Therefore, the total number of persons living with HIV reported to the HIV/STD Prevention and Care Branch is 15,207. Figure 11 indicates the cumulative number of persons living with HIV or AIDS from 1983 to 2001. The totals indicate persons living through the years with their status, HIV or AIDS, at that particular year.

As of December 31, 2001, this group of people living with HIV can be described as about 68.4% (10,396) males and 31.6% (4,804) females. This group is also about 23.8% (3,610) White non-Hispanic and 72.3% (10,983) African American/Black non-Hispanic. This group of people living with HIV falls into the following age groups representing the individual's age at the end of 2001: 11.6% (1,758) were 20-29 years of age; 36.7% (5,575) were 30-39 years of age; 34.9% (5,311) were 40-49 years of age; 15.1% (2301) were over 50 years of age. Other age groups represented less than 1% each. Please note that this age distribution reflects current age rather than the more usual age at diagnosis.

One method for estimating HIV prevalence is based upon the CDC estimate that two-thirds of the persons living with HIV and AIDS have been tested and know their status. Applying this estimate to our current surveillance total of 15,207 persons living in North Carolina with HIV/AIDS would increase the prevalence estimate to about 20,000. This estimate, however, is likely overstated because some HIV/AIDS reports may be listed as



living in the surveillance data, but are in fact not. Thus, using this method, we would estimate the prevalence to be between 15,000 and 20,000 HIV infected persons living in North Carolina.

Demographics and Risk

Age at diagnosis

Most *HIV disease* reports are for adults and adolescents, as only 238 of the total of 21,993 reports have been received for infants or children younger than 13 (Table 2, pg. 46). Adults aged 30 years or greater accounted for almost 75% of the reports in 2000-01,

up from about 65% for 1990-91 reports. Reports for adults aged 50 years and older have also increased in recent years, up from 8.1% of reports in 1996-97 to 11.8% of reports in 2000-01. The rate (per 100,000 population) of new reports for the different age groups similarly reflects a distribution like the overall proportions of cases (Table 3, pg. 47). The 30-39 year olds have the highest rate of new reports at about 47 cases per 100,000 persons followed by 40-49 year olds with about 35 cases per 100,000. The rate for 20-29 year olds was close to these rates with about 31 cases per 100,000. HIV is reported among an older population as compared to some other sexually transmitted diseases like gonorrhea and chlamydia. The age distribution of HIV is however, similar to the age distribution of syphilis reports (Table 4, pg. 48).

Gender

Figure 12 displays the gender distribution of *HIV disease* reports through December 31, 2001. The gender distribution of reports has changed since the beginning of the epidemic. The male/female report ratio has gone from approximately 8:1 in the 1980's to about 2:1 in recent years. The rate of new reports for men in 2001 (28 per 100,000) was greater than twice that for women (12 per 100,000). This difference in rates for men and women has not changed significantly in the last 5 years, although there appears to be a slight decrease in the overall difference between the two (Table 3, pg. 47).

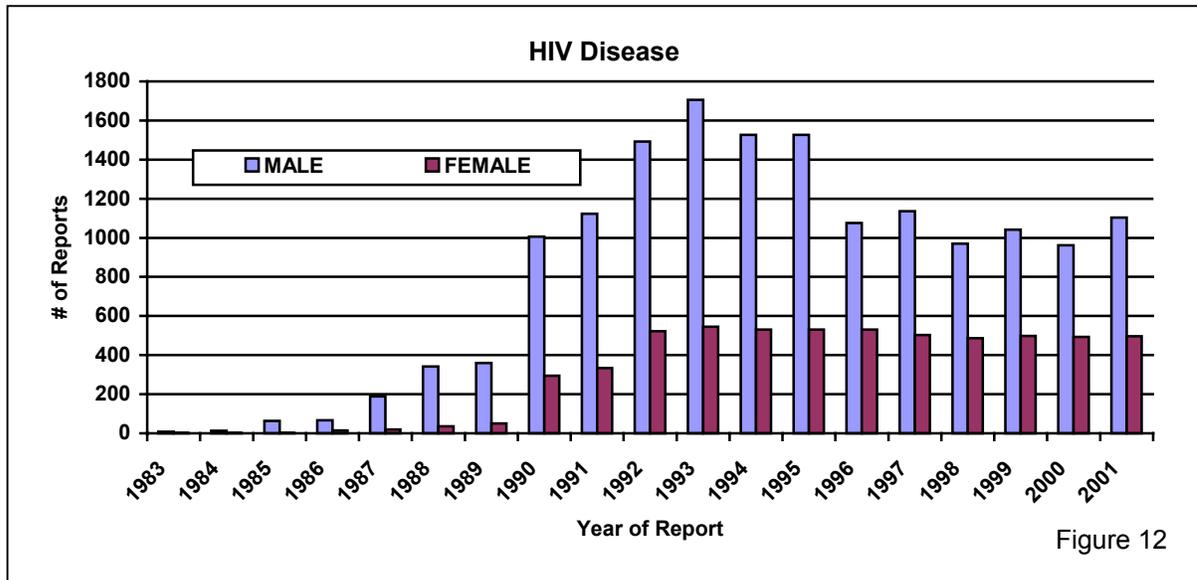
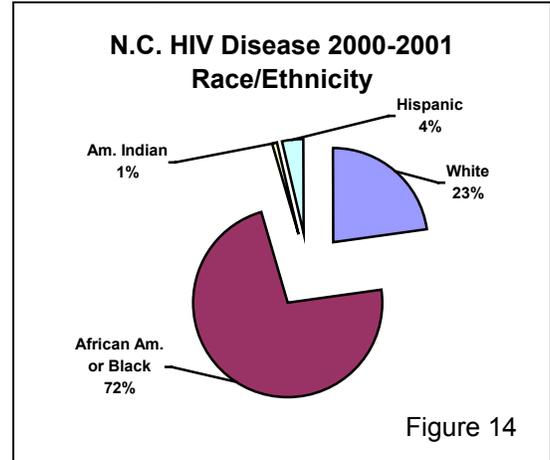
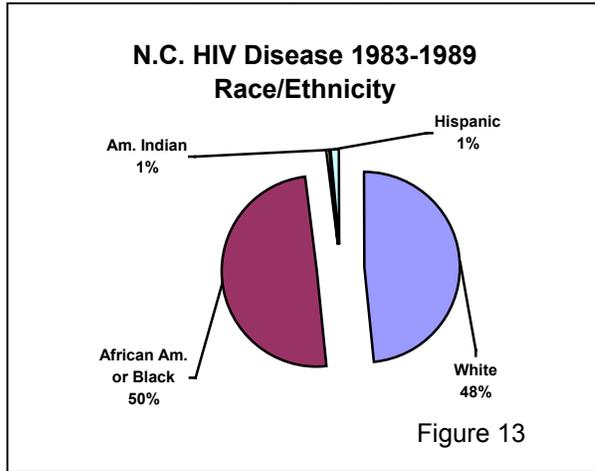


Figure 12

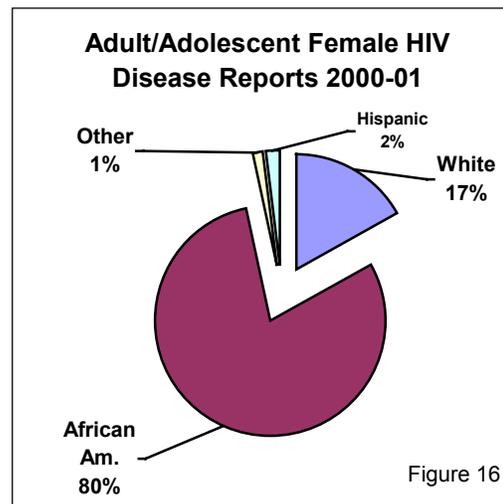
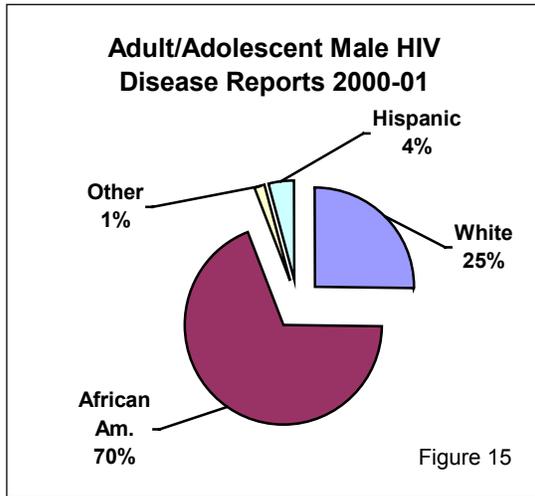
Race/Ethnicity

The race/ethnicity of the epidemic has also changed since the beginning of the epidemic. Reports for African Americans/Blacks shifted from just under 50% of cases reported between 1983 and 1989 to about 72% of cases reported in 2000-2001 (Figures 13, 14; Table 5, pg. 49). Figures 15 and 16 display the race/ethnicity distribution of 2000-2001 reports for males and females. Since the racial/ethnic makeup of North Carolina is not equal among the various groups, comparing proportionate changes in the HIV reports for different racial and ethnic groups does not fully describe the impact of HIV on these groups. A rate comparison of new cases better illustrates the impact. Table 3 (pg. 47) displays the rates of new individuals reported each year for 1997 - 2001 for different

demographic groups. The rate of new reports among African Americans/Blacks was about 67 cases per 100,000 population in 2001. This rate is the highest of all racial ethnic



groups and was almost 11 times that of non-Hispanic Whites, whose rate was about 6 per 100,000 population. The case rate for Hispanics (~16/100,000) is about 2½ times that of Whites and the rate for American Indians (~18/100,000) is about 3 times that of Whites. It is especially important to keep in mind how these populations may be changing within the state. The Hispanic or Latino community has grown significantly in recent years in North Carolina, and this growth is expected to continue.



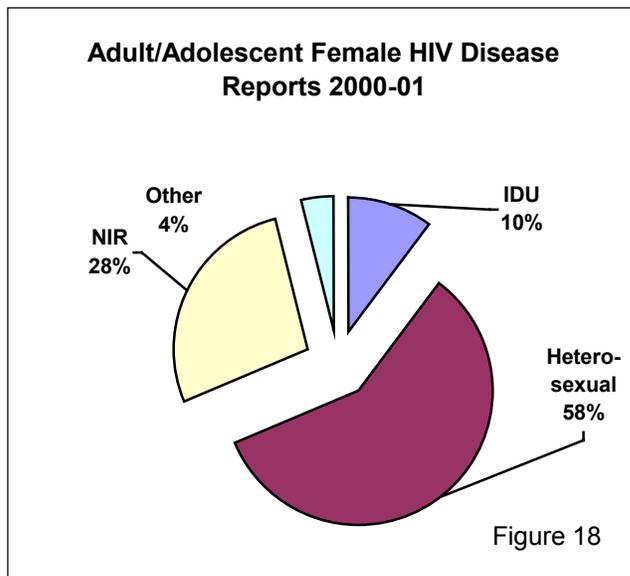
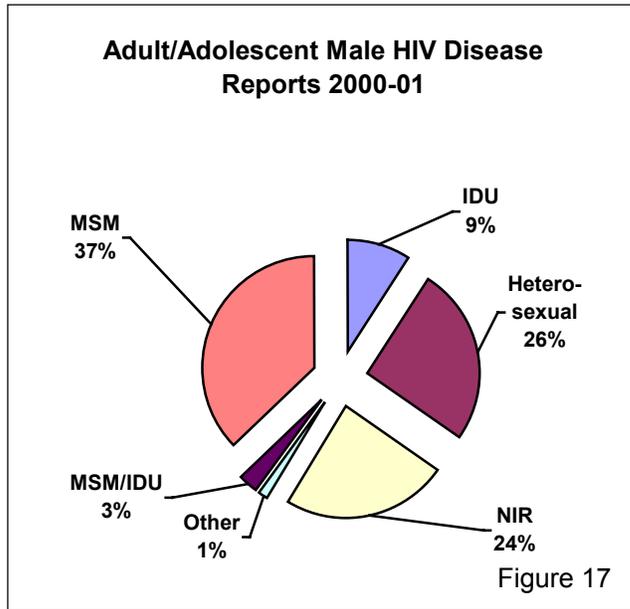
Mode of Transmission

Table 6 (pg. 50) displays the mode of transmission for adult/adolescent *HIV disease* cases since the beginning of the epidemic. Inferring trends from this data should be done with extreme caution because of the large proportion of reports with incomplete or missing risk information that have occurred since HIV reporting began in 1990. Because of the increase in reports that began with the advent of HIV reporting and the lack of resources to gather this information on all cases, reports without identified or reported risk (NIR) will likely continue. Future enhancement to surveillance data may allow for the allocation of risk for the reports based on sampling studies, but it is currently unavailable.

Readers should also keep in mind that risk information is still be gathered about some recent reported cases so the displayed risk information for the 2000-2001 year period is considered somewhat preliminary.

The proportion of cases for which there is no identified risk (NIR) (according to the CDC definition) has remained higher among females than among males in every time period, and constituted 39% of cases for both sexes combined during the years 2000-2001 (Table 6, pg. 50). As mentioned earlier, some of these cases are under investigation at this time and may be reclassified to one of the risk groups listed. Investigation of transmission risk of some cases has revealed that while there is no CDC-defined attributed risk, there are

known behaviors and factors that should be considered for these cases. It is our belief that this growing proportion of NIR cases is causing heterosexual transmission to be under-represented. Awareness of a partner's HIV status is a component of the CDC heterosexual transmission definition for most cases. In many of these NIR cases, the reference individual or index case is likely unaware of the partner's status because of the nature of sexual contact and associated behaviors of experiencing multiple partners or exchanging sex for drugs or money. Further for the same reasons, the partner himself or herself is likely unaware of his or her own serostatus. We believe that in guiding the planning for HIV prevention, we must not ignore the associated behaviors or misstate the cases as simply "risk not identified." It is truly the behavior of experiencing multiple partners or exchanging sex for drugs or money that has put many of the people reported at risk for HIV infection. If we continue to only accept heterosexual transmission as occurring when the index case knows the serostatus of a partner, we will under-represent the influence of heterosexual transmission.



Therefore, cases that do not meet one of the CDC risk classifications (NIRs) have been

reevaluated and reassigned to a “presumed” risk category where appropriate. To be reassigned, the NIR cases must have been interviewed and additional risk information must have been collected. NIR cases are reassigned to a “presumed heterosexual” category if male-to-male sexual contact has not been identified; heterosexual contact has been identified; and the individual admits to the exchange of sex for drugs or money, to having multiple heterosexual partners, the use of non-injecting drugs, or has a documented history of a prior sexually transmitted disease. In the reference tables, this presumed heterosexual category will be labeled separately where possible, but in the discussion and some of the graphs, the presumed heterosexual and CDC heterosexual categories will be combined and discussed as a single risk group (Tables 7-11A, pg. 52).

Because the proportion of NIR reports varies through time, it is somewhat difficult to follow changes in the proportion among the risk groups. To simplify the discussion and describe the overall changes, some of the discussions will exclude reports without specified risk (NIRs). When this happens, it is important for the reader to be aware that this assumes that risk in reports without a specified risk (NIRs) is similar to the risk of reports overall.

For adult/adolescent reports where risk is known, men who have sex with men (MSM) and men who have sex with men and inject drugs (MSM/IDU) reports constituted about 65% of the reports in the 1980s and about 37% of the reports in the 2000-2001 period (Table 7A, pg. 52). For reports that have a known heterosexual transmission risk, the proportion has increased from 6.5% of adult/adolescent reports in the 1980s to 38% of the reports in 2000-2001. Reports for injecting drug use (IDU) and MSM/IDU made up about 38% of reports in the early 1990s and 15% of the reports in 2000-2001. The proportion of reports associated with a known transmission risk involving hemophilia, receipt of blood products or organ transplants, or other blood-to-blood risk constituted 7% of reports in the 1980s and just under 3% of reports in 2000-2001. All these changes reflect how the epidemic has changed over time to affect different groups. Figures 17 and 18 display the mode of transmission of both males and females for 2000-2001 reports.

Geographic Distribution of HIV Infection

According to the Centers for Disease Control and Prevention, in the United States most HIV and AIDS reports are from large metropolitan areas (greater than 500,000 population) in all regions of the country. The South as a region has the greatest proportion of reports from small metropolitan areas (50,000-500,000 population) and non-metropolitan areas (less than 50,000). According to the CDC, more than 20% of North Carolina's AIDS reports in 1999 were from non-metropolitan areas. North Carolina was among four states (including Florida, Mississippi and South Carolina) that reported the most HIV infection (not AIDS) cases from non-metropolitan areas. It is important to note that HIV is not currently reported in all states; thus the region/state HIV (not AIDS) comparisons are only for those states that report HIV.

North Carolina 2001 HIV Disease Cases

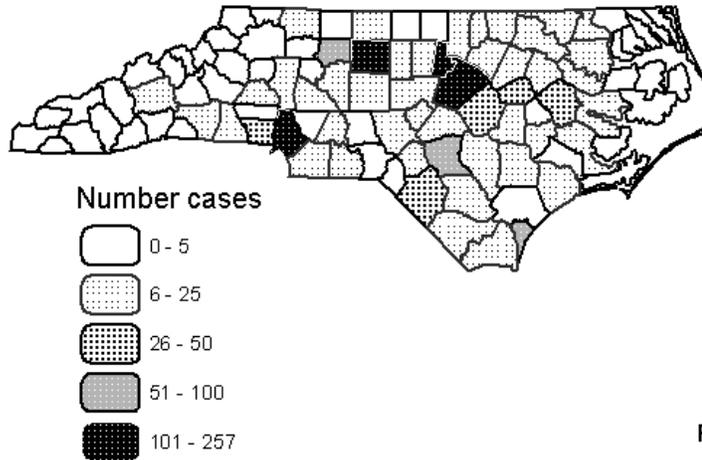


Figure 19

North Carolina 2001 HIV Disease Rates

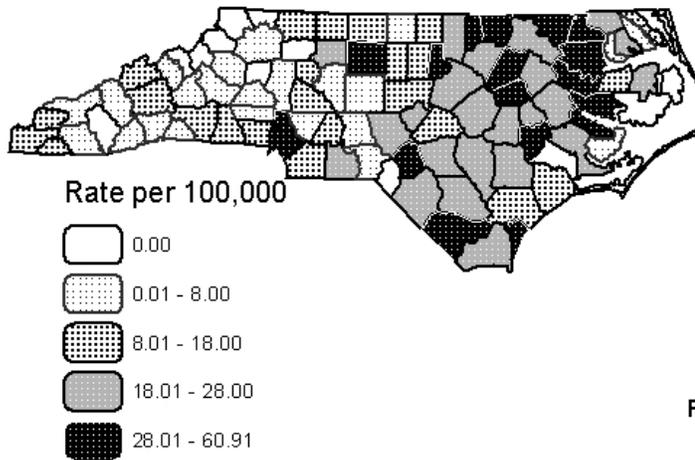


Figure 20

The distribution of *HIV disease* (HIV & AIDS) is uneven across the North Carolina as can be seen in Figures 19 and 20. This distribution can be partly explained by the population distribution, as the epidemic tends to be concentrated in urban areas though it reaches rural areas as well. As noted from the CDC statistics earlier, North Carolina's HIV epidemic, like that of other states in the South, is more rural in nature as compared to the national epidemic. North Carolina has a significant rural component. Since the early 1990s, roughly about 25% of North Carolina's *HIV disease* reports have come from rural or non-metropolitan counties. This trend seems fairly steady and reflects the demographics of the state (Table 12, pg. 61). Tables 22-25 (pp. 71-76) give the individual county totals of all *HIV disease* and AIDS cases reported, cases listed as living at the end of 2002, and a ranking of case rates (per 100,000) based on a three-year average. Readers are cautioned to view rates carefully, as rates based on small numbers (generally less than 20) are considered unreliable.

IV. WHO IS AT RISK FOR BECOMING INFECTED WITH HIV?

The persons most likely to become infected with HIV are those who engage in high-risk disease transmitting behaviors with persons in communities that have a high prevalence of HIV infection. Simply describing the impact of HIV in terms of demographics and describing the overall changes in risk information does not directly answer the question of “Who is at risk for becoming infected with HIV?” To better describe who is at greatest risk, demographic and risk information must be analyzed together to uncover significant changes and isolate any trends for specific risk groups. Because there can be significant delay between an individual's infection with HIV and the subsequent testing and reporting of information for that individual, it makes sense to closely examine reports that can be considered a reflection of recent exposures. Any differences in the pattern or trends among recent infections, as compared to overall patterns and trends, could have significant implications for HIV prevention planning. Finally, although some populations may not contribute significant proportions of cases to the overall epidemic, they may need to be addressed with regard to any available HIV trend or risk information. This includes populations of special interest that may be targeted for health initiatives by other public health prevention programs that include STD prevention as part of their objectives. There are also other special-interest populations that are a significant component of smaller or isolated communities with special needs in the state. Some special populations of interest in North Carolina include adolescents, the perinatal population, and certain racial/ethnic minorities.

Relative risk among the various risk groups is extremely difficult to ascertain because rate information is unavailable for some groups. In order to calculate rates, we must have not only estimates of the number of persons infected, but also estimates of the uninfected population as well. Unfortunately, we do not have reliable population estimates for some of the groups defined by risk behaviors, so the best information may be limited to the proportion they represent among all cases. Changes in the overall proportion can isolate trends for these groups if the populations are stable, but don't measure relative risk among the groups. ***It is important to keep in mind that the relative risk of infection within***

these groups may vary greatly depending on the size of the uninfected population for that group. Groups that represent the smallest population may represent the greatest relative risk.

For communities at large, measures of risk should include identifying the level of risk-taking behaviors among its components and being aware of any changes in these behaviors. Because risk-taking behaviors may vary significantly from community to community and independent measures may be unavailable, it is important for members of the community itself to be involved in designing and implementing prevention programs. In North Carolina, several community-based organizations actively participate in helping to determine community risk for sexually transmitted diseases, including HIV.

To begin the ascertainment of where risk is greatest, a baseline of comparison for risk and demographics is necessary. The overall risk information from morbidity reports is combined with the demographic variables that indicate the most disparity among cases. This identifies groups or communities with high prevalence. The next step is to enhance the risk information from surveillance data with relevant data from other sources for the identified groups. Such data can include HIV counseling and testing data, morbidity data for other STDs and any survey or additional data which measures activities where transmission can occur among the risk groups. We will include some discussion of this other data, but this report will focus strongly on morbidity surveillance data for *HIV disease*. Sustained or consistent increases among the risk groups with highest prevalence may indicate an increasing risk for the community at large and the necessity for additional prevention actions. Decreases or plateaus among groups, may indicate successful interventions or that all or most of the at-risk population within that group has been exposed.

New Infections

Serologic studies that identify new infections can be difficult to implement and may not be generalizable to all populations. Some such studies have been initiated in various areas of the United States, but these studies are of limited use to North Carolina communities that are inherently different in make-up. Although morbidity surveillance data is limited or prone to testing patterns of the population, which can change over time, it is the most complete information available about HIV for the population in North Carolina. Certain adjustments can be made to the surveillance data to eliminate reports that are known to reflect older infections. For this analysis, we will exclude any new individuals reported if that individual's first report was with an AIDS diagnosis or if that individual developed AIDS within two years of being first reported. Table 8 (pg. 53) displays the demographics of such reports. As expected, this group of more-recent infections reflects a slightly younger population, but it also reflects proportions and trends that are very similar to the overall morbidity surveillance data. In comparing Table 8 (pg. 53) with Tables 2 (pg. 46), 5 (pg. 49), and 7 (pg. 51), note that the same demographic trends are represented in both the more recent reports and the overall reports. We see increases in the 40-49 year old group over time as well as the 50 years and older age group. We also observed about the same level of disparities among

racial/ethnic groups. Finally, mode of transmission categories in the recent reports were represented similarly (proportions) to the categories in the overall morbidity tables. All these comparisons lead us to the conclusion that the recent reports from the surveillance data do not substantially differ from the overall surveillance data. Thus, the following discussions in the profile will concentrate on examining the trends identified in overall surveillance data, which contains more information.

Other Risk Behavior Information

Pregnancy Data

As a surrogate measure for behaviors that place persons at risk for HIV infection as a result of heterosexual activity, we utilized pregnancy rates. Data from the State Center for Health Statistics, "North Carolina Reported Pregnancies, 2000," indicated that the pregnancy rate for North Carolina was 83.1 per 1,000 females aged 15 to 44, which is just below the 1999 rate of 84.7. The 2000 rate includes 78.0 pregnancies per 1,000 for White females (up from 77.1 in 1999) and 94.5 per 1,000 non-White females (down from 104.3 in 1999). Of the 148,128 pregnancies in 2000, 59,965 were among unmarried women.

There were 546 pregnancies among young girls age 10 to 14 years old, 217 of which were among White girls and 329 among non-White girls. In addition, of 19,892 girls aged 15 to 19 who were pregnant, 11,569 were White and 8,323 were non-White. Of the 11,569 pregnancies for White women aged 15-19, about 70%, or 8,028, were unmarried. Of the 8,323 pregnancies for non-White women aged 15-19, about 93%, or 7,726, were unmarried.

The abortion rate for North Carolina in 2000 was 15.1 abortions per 1,000 live births, which includes 9.7 for White females and 27.4 for non-White females. The abortion rate decreased from 1999 (16.7). Readers are reminded that pregnancy alone is not a risk factor for HIV.

STD Morbidity Other Than HIV

Persons with bacterial sexually transmitted diseases represent a group of sexually active people who have recently had unprotected intercourse. The extent to which STD rates correspond with HIV risk depends on HIV infection rates within the sexual network of persons practicing unsafe sex. While STD data is an imperfect marker for risk of HIV infection, it does provide a reliable indicator of high-risk behavior. Groups with high incidences of STDs are potentially at increased risk for acquiring HIV. Additionally, considering the relatively short incubation periods for these infections, STD morbidity represents the recent consequences of unsafe sexual behavior and indicates population groups that are practicing unsafe sexual behavior and are at greater risk for acquiring and transmitting HIV infection. North Carolina ranks high compared to other states in STD rates. According to preliminary data released by the CDC, in 2001 North Carolina's gonorrhea rate ranked it 7th in the nation, its rate for primary and secondary syphilis ranked it 5th, and its rate for chlamydia ranked it 20th.

Studies indicate that people who are infected with gonorrhea and chlamydia are three to five times as likely to contract HIV, and those with lesion diseases such as herpes and syphilis have nine times the risk (1996 May, *Alive and Kicking* Issue 55, by Teresa Tamkins, Medical Tribune News Service). According to Dr. Jean Anderson, in the 1996 July, *Johns Hopkins University, Hopkins HIV Vol. 8 No 3 – Women’s Issues*, the increased risk is believed to relate, at least in part, to the increased numbers of HIV target cells and the increased HIV shedding in the genital tract associated with STDs. Treatment of genital tract infections has been shown to decrease both the presence and magnitude of HIV shedding.

Table 4 (pg. 48) presents the demographic distribution for cases of infectious syphilis, gonorrhea and chlamydia in 2001. Although risk information is unavailable for gonorrhea and chlamydia, the male-to-female ratios give us indication that morbidity is most likely reflective of heterosexual transmission. For early syphilis (which includes primary, secondary and early latent cases) patient interviews are completed and risk is collected. For syphilis, here again the male-to-female ratio (1.2:1) is fairly close to 1:1, indicating a largely heterosexual transmission. The risk information collected for syphilis cases bears this out as approximately 588 of 618 primary and secondary cases in 2000 indicated a likely heterosexual transmission.

As mentioned earlier, the demographics for these diseases are different. For gonorrhea, the age-group rates are highest among 20-29 year olds, with high rates also for 13-19 year olds. For chlamydia, the age group rates are highest for 13-19 year olds with rates for 20-29 year olds close behind. For syphilis, the rates are highest among 20-29 and 30-39 year olds. These infections not only demonstrate the high-risk behavior of the populations involved, they also increase the probability of acquiring the HIV infection should the person involved become exposed to the virus while infected with another sexually transmitted disease. Thus, prevention activities aimed toward sexually transmitted diseases will help reduce the threat of HIV as well. Figures A-1 and A-2 (pp. 43-44) display the county rates for all STDs for year 2001. These maps indicate the strong potential connection between HIV and other STDs in North Carolina.

More detailed information about bacterial STD morbidity trends can be found in Chapter VI.

HIV Counseling and Testing

The North Carolina Commission for Health Services’ ruling to discontinue anonymous testing for HIV became effective in May, 1997. Concern raised that in removing the anonymous test option, North Carolina would reduce testing among persons at high risk for HIV infection. Before the option for anonymous testing was removed, the HIV/STD Prevention and Care Branch

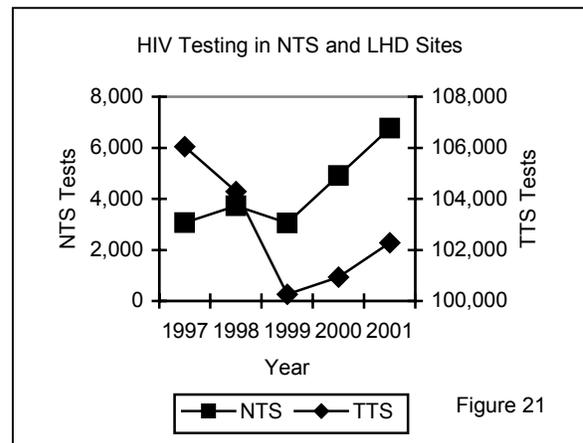


Figure 21

implemented procedures to make HIV testing available in nontraditional settings. Nontraditional HIV test sites (NTS) operate as either stand-alone test sites through a community-based organization (CBO) or local health department (LHD) or are physically located in a local health department but have hours of operation other than the normal working hours for the health department. The sites other than NTS have been designated as traditional test sites (TTS) in this chapter. Traditional test sites are predominately local health departments and some CBOs.

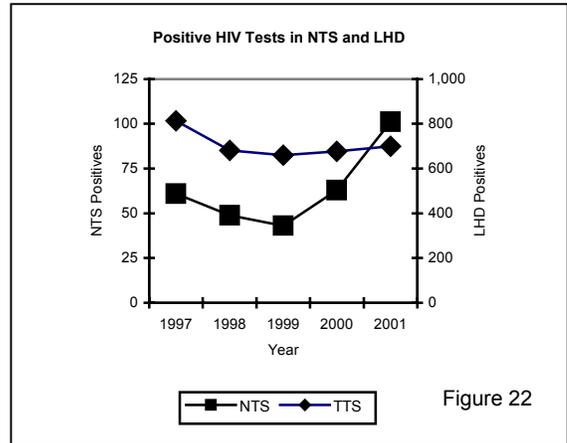


Figure 22

The number of tests, number of positives and positivity rate by type of test venue and year for publicly funded HIV testing in North Carolina are presented in Figures 21 through 23. Public sites are those sites funded by the Branch to conduct HIV counseling and testing and include local health departments, community-based organizations and nontraditional HIV test sites. The first year during which the number of HIV tests conducted in public sites did not increase was 1997. The long-term trend of decreasing positivity rate noted during the 1990s has continued through 2000. The positivity rate

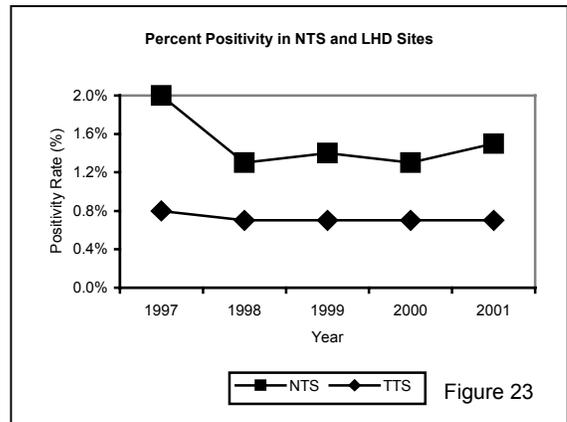


Figure 23

(number of positives per 100 tests performed) has been less than 1% since 1995. High-risk clients (MSM, MSM/IDU, IDU, persons who exchange sex for drugs or money, persons who have sex while using non-injecting drugs and persons who are sex partners of persons at risk or persons infected with HIV) continue to seek testing through publicly funded test sites. However, HIV testing in nontraditional test sites continues to identify a greater *proportion* of positives than testing in other publicly funded sites. The NTS positivity rate was 1.2% compared to 0.7% for other public site testing for CY 2001 (Figure 23).

The major difference noted between clients seen in NTS and other sites is the proportion of tests comprised by high-risk clients. Men who have sex with other men (MSM),

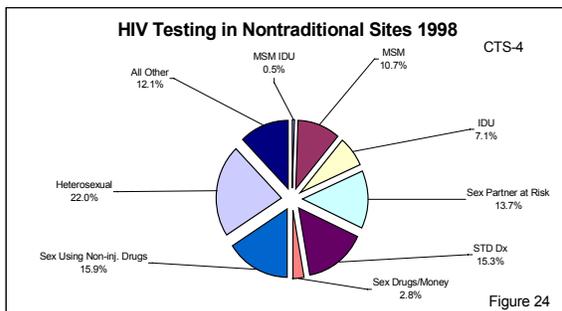


Figure 24

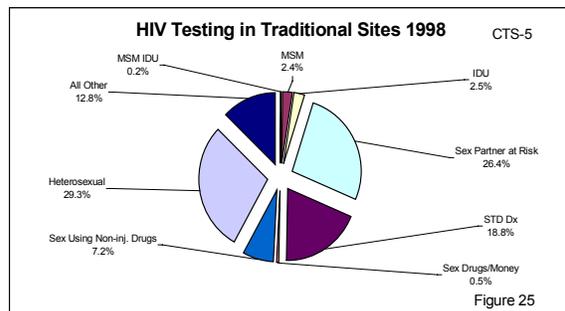
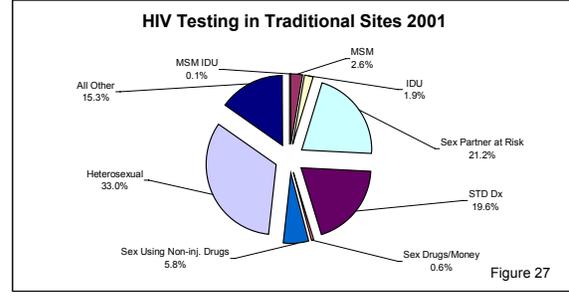
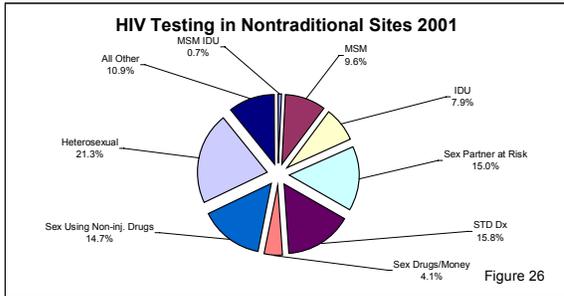


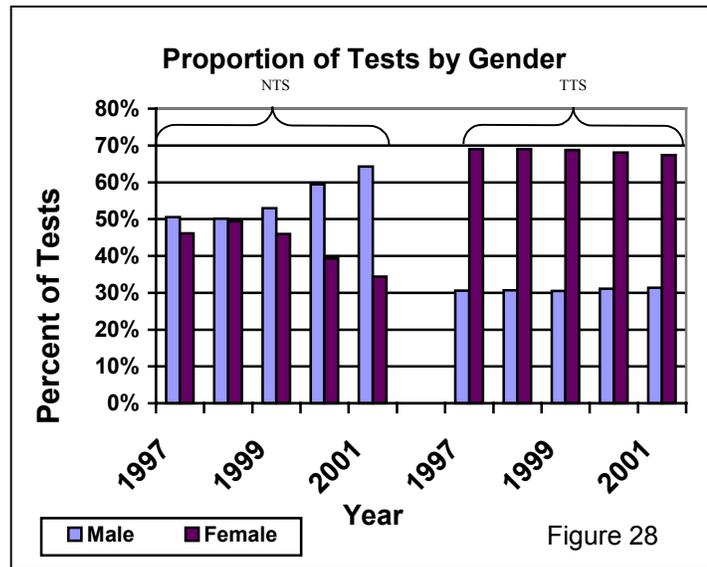
Figure 25

injecting drug users (IDU), and clients reporting both risks made up approximately 18% of the clients tested in NTS during 2001 (Figure 24), compared to approximately 5% of the LHD site clients during the same time (Figure 25). In addition, clients who exchanged sex for drugs or money and clients who had sex while using drugs made up an additional 19% of the NTS clients but only 6% of the LHD clients. These proportions have changed very little as of 2001 (Figures 26 & 27).



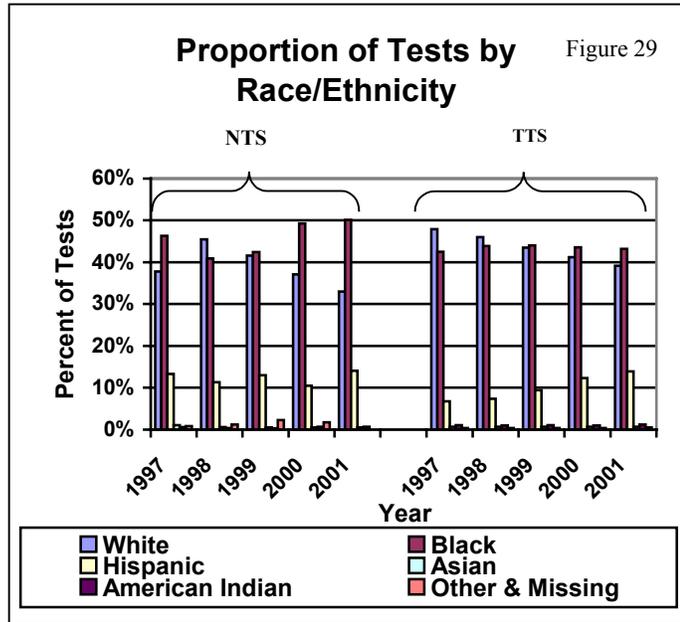
The number of male clients as compared to females at NTS sites was about the same in 1997-98, while approximately 70% of the clients tested in LHD sites were female (Figure 28). Over the past two years however, testing in NTS for males has increased dramatically compared to testing for females. Testing in TTS has not changed as dramatically with respect to the gender ratio. The high proportion of female clients tested in LHD sites is due primarily to testing in prenatal and family planning clinics.

Approximately the same proportion of the clients seen in LHD and NTS sites are White (41% and 40%, respectively) (Figure 29). From 1997 through 2001, an increase in the proportion of tests for Hispanics was seen in LHD sites, while the proportion of Hispanics tested at NTS sites remained essentially



unchanged. The proportion of males tested in NTS sites is approximately twice the proportion in other public sites (28), but the relative positivity rate for men is not appreciably different in NTS and LHD sites (Table 13, pg. 62). Women have approximately a three-fold greater positivity rate from NTS sites than from LHD sites, but readers must be cautioned that the women tested in NTS sites are at higher risk than the total population of women tested in LHD sites. There are some unexpected positivity rates found among the various risk group populations tested in the two venues. While MSM and MSM/IDU testing represents a higher proportion of tests in NTS sites, the positivity rate for these groups is about two-fold greater in LHD sites than the NTS sites (Tables 14 & 15, pp. 63-64). The positivity rates for IDU clients are the same in both

venues, although IDU testing proportions are about three-fold greater in NTS sites than LHD sites. Repeat test behavior is equivalent in the two test sites (about 60% of clients were previously tested with negative results). Among the clients who were tested and found to be positive, 50% of the NTS clients had a previous negative test compared to 37% of the clients tested in LHD sites. We believe all of these findings taken together indicate that the NTS are serving a population at higher risk even though the seroprevalence in this population does not appear to be higher than that found in the population visiting LHD sites. The NTS model may provide a testing venue where clients are more likely to return for repeat testing. In terms of the recent recommendations by the Centers for Disease Control regarding multiple/ongoing risk reduction message delivery, NTS venues might present opportunities for such risk reduction message activity to occur.



We found that a surprisingly high proportion of the positive tests found in both testing venues were persons who had previously been tested and were positive on their first HIV test. Twenty-one of 101 positives (21%) reported through NTS testing in 2001 reported that they were previously tested with a positive result. One hundred ninety-seven of 699 (28%) of the positives reported from LHS sites in 2001 reported a previous positive result. These previous positive reports are self-reports from the clients and should be viewed with some caution, however. Of the NTS clients reporting a previous positive test, 19% were found to be negative on the test reported in 2001. Among the clients tested in TTS, 21% of the clients reporting a previous positive test were found to be negative for the currently reported test. We believe these results suggest either client recall errors or unclear pretest counseling questions about previous test status.

Behavior Surveys

The Behavioral Risk Factor Surveillance System (BRFSS) is a random telephone survey of health behaviors and preventive health practices of state residents aged 18 and older in households with telephones. North Carolina’s BRFSS, conducted by the State Center for Health Statistics, is part of the national program which was developed in the early 1980s by the Centers for Disease Control and Prevention (CDC) in collaboration with state health departments. Some questions about basic HIV/AIDS knowledge are part of this survey, and in 2001 additional specific questions were added that addressed sexual behaviors. Results of the survey indicated the following:

- ◆ 92.1% of respondents indicated that it is very important for people to know their HIV status by getting tested.
- ◆ 87.3% of respondents indicated that they thought that it was true that there are medical treatments that help an HIV-infected person live longer.
- ◆ 49.5% of all respondents indicated that they had been tested for HIV. Further, African Americans were more likely to indicate that they had been tested than Whites.
- ◆ 47.9% of respondents indicated that they had been tested for HIV by a private doctor.
- ◆ 75.6% of all respondents indicated that they had had sexual intercourse with one individual over the previous 12 months. 3.8% indicated sexual intercourse with 2 individuals, and 4.6% indicated sexual intercourse with 3 or more individuals.
- ◆ For unmarried respondents, 9.8% indicated that they had had sexual intercourse with 2 individuals over the previous 12 months. An additional 9.6% indicated intercourse with 3 or more individuals.
- ◆ 50.7% of respondents thought that a properly used condom is very effective to keep people from getting infected with HIV through sexual activity. An additional 37.8% thought that condoms are somewhat effective.
- ◆ Of all respondents, 20% indicated that a condom was used the last time that they had sexual intercourse. This percentage increased to 46.4% for unmarried respondents.

For more information about the BRFSS in North Carolina, please visit the State Center for Health Statistics web site at <http://www.schs.state.nc.us/SCHS/>.

The Youth Risk Behavior Surveillance System (YRBSS) is surveillance system to collect a broad range of health information from school-age children and adolescents. This survey is administered in schools and includes questions about sexual activities and risk-taking behaviors for high school students. A new North Carolina survey was completed in 2001. Unfortunately, not enough school systems participated in the questions about sexual activities and associated risk-taking behavior in this new survey for the samples to be valid with respect to these questions. It is hoped that more school systems will participate in these questions in future surveys because the information is extremely valuable to community groups planning STD prevention initiatives.

Populations That Represent the Greatest Proportion of HIV Reports

Tables 9, 9A, 10, 10A, 11 and 11A (pp. 54-60) combine risk information with race/ethnicity for very specific groups. Changes or trends can be followed for the different groups. These groups represent risk categories that contain the most *HIV disease* reports and will be the focus of discussion for who is at greatest risk. Table 9 (pg. 54) combines race/ethnicity with mode of transmission. The group that represents the largest proportion of reports in the 2000-2001 period is African American heterosexuals, followed by African American MSM and then White MSM and then African American IDU. Next comes White heterosexuals and then White IDU (see Table

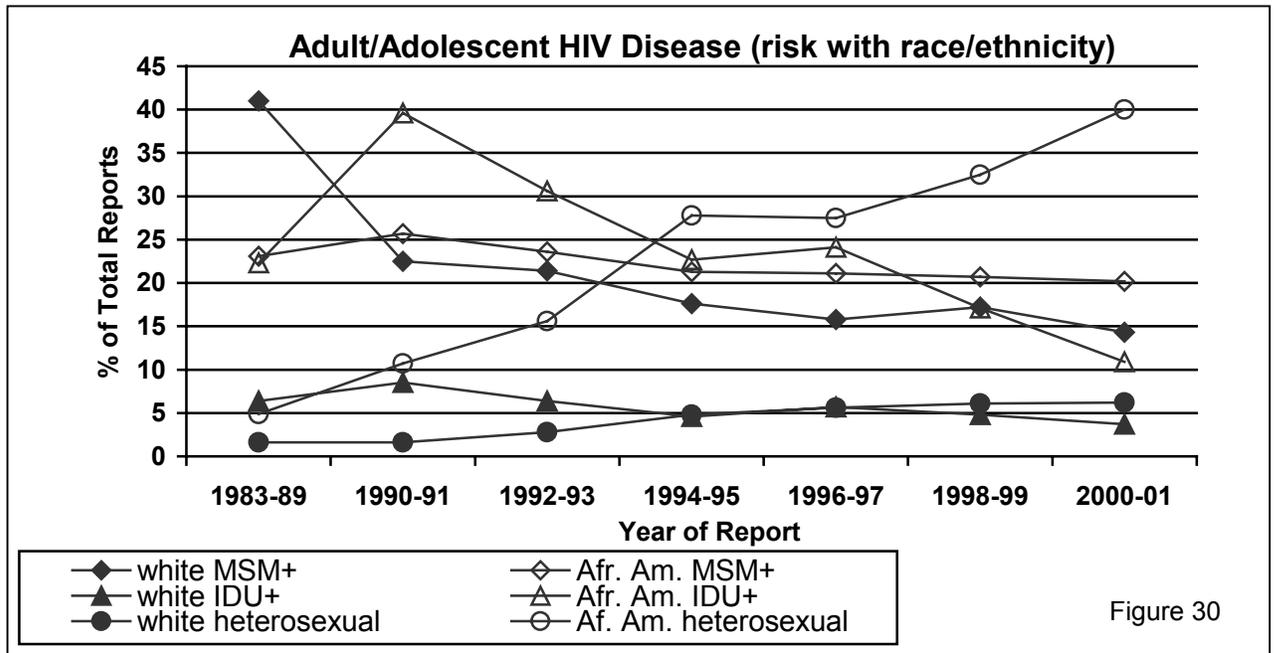


Figure 30

9A, pg. 55). Figure 30 displays the proportion of specific risk groups (by race/ethnicity) within all reports and the change over time. Because these groups represent very different proportions in the population, relative risk or prevalence among the groups varies significantly. MSM and IDU represent much smaller proportions of the population than heterosexuals. African Americans represent about only one-fourth of the population in N.C. as compared to Whites. This means that prevalence is higher among African American MSM than White MSM and African American heterosexuals. The IDU populations are very small and the prevalence among African American IDU is likely higher than among White IDU, but because the makeup of the IDU population is likely dependent on social and economic factors, the two groups (White IDU and African American IDU) may be very dissimilar. These risk groups mentioned above are discussed in more detail below. The risk groups are listed in rank order of the proportion they represent of all HIV reports in 2000-2001.

African American Heterosexuals

HIV reports attributed to heterosexual contact (including presumed heterosexual contact) accounted for almost 48% of the cases in 2000-2001 where risk is known (Table 7A, pg. 52). HIV risk, however, is not shared equally among all heterosexuals. Minority racial/ethnic groups are at much greater risk. The increase in reports for the African American heterosexual risk group has been dramatic and has continued since the beginning of the epidemic (Figure 30). Excluding reports without a categorized risk, this group has seen their proportion of all reports go from less than 5% in the 1980s to almost 40% of reports in 2000-2001 (Table 9A, pg. 55).

While less than 3% of male cases (excluding NIRs) were attributed to heterosexual contact among African Americans/Blacks during the 1983-1989 period, this percentage has increased to 28% for 2000-2001 reports (Table 11A, pg. 60). The male reports

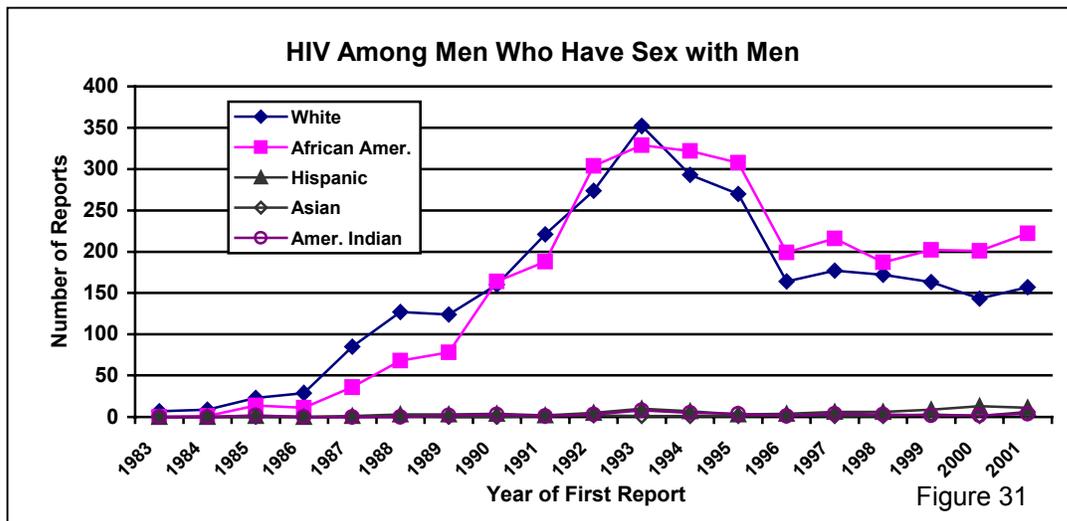
(2000-2001) attributed to heterosexual contact among African Americans/Blacks is almost equal to the male reports attributed to MSM and MSM/IDU risk among African Americans, is the highest single risk category for men (Table 11A, pg. 60).

The percentage of all female cases (excluding NIRs) attributed to heterosexual contact among African Americans/Blacks increased from about 28% in the 1983-1989 period to almost 67% in 2000-2001. The proportion of female reports attributed to heterosexual contact among African Americans/Blacks in 2000-2001 is almost 7 times greater than the proportion of reports for any other female risk category group (Table 10A, pg. 57).

It is important to note that in this discussion of heterosexual contact, our definition of heterosexual contact includes the “presumed heterosexual category” as defined earlier.

African American MSM

HIV reports attributed to MSM and MSM/IDU accounted for almost 37% of all the cases in 2000-2001 where risk is known (Table 7A, pg. 52) and 50% of the male reports. Again, however, HIV risk is not shared equally among all MSM. Minority racial/ethnic groups are at greater risk. In the beginning of the epidemic, the proportion of male HIV reports (excluding NIRs) attributed to MSM and MSM/IDU risk for African Americans has risen from about 25% to about 29%. Although Whites outnumber African Americans about 3 to 1 in the population, the number of African American MSM reports outnumbered the White MSM reports beginning in the mid 1990s (Figure 29). Excluding reports without a categorized risk, African American MSM and MSM/IDU reports have remained a significant and fairly steady proportion of all reports through the 1990s with indications of a slight increase in recent years. (Table 11A, pg. 60). There is some anecdotal evidence and other information that suggest that MSM and bisexual behavior may be underreported.



White MSM

In the beginning of the epidemic, the proportion of male HIV reports (excluding NIRs) attributed to MSM and MSM/IDU risk for White non-Hispanics accounted for most of the reports. The proportion of all male reports attributed to this group has declined since

that time, but has remained fairly steady in recent years at about 23% of all male reports (Table 11A, pg. 60). White non-Hispanic MSM and MSM/IDU remain a significant proportion of HIV reports. Again as mentioned above, there is some anecdotal evidence and other information that suggest that MSM and bisexual behavior may be underreported.

African American IDU

While almost 49% of all HIV reports where risk is known were attributed to IDU and MSM/IDU of all racial and ethnic groups in 1990-1991, the proportion has declined to about 16% of all cases in 2000-2001 (Table 7A, pg. 52). There has been significant change in the proportion of reports attributed to this risk group for different racial/ethnic groups as well as both genders.

While almost 48% of female cases (excluding NIRs) were attributed to IDU among African Americans/Blacks during the 1983-1989 period, this percentage has decreased to about 10% for 2000-2001 reports (Table 10A, pg. 57). This represents a significant change in risk reported for African American females.

The percentage of all male cases (excluding NIRs) attributed to IDU and MSM/IDU among African Americans/Blacks decreased from about 38% in 1990-1991 to almost 11% in 2000-2001 (Table 11A, pg. 60).

It is important to note, however, that how risk compares among the different racial/ethnic IDU groups is uncertain.

White Heterosexuals

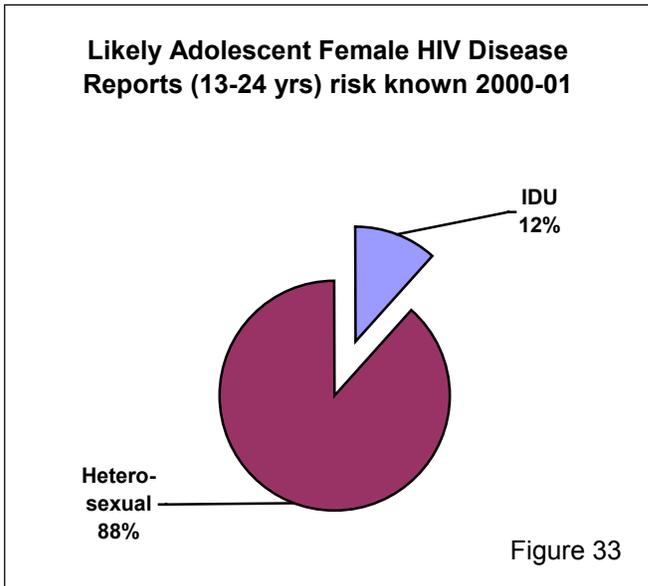
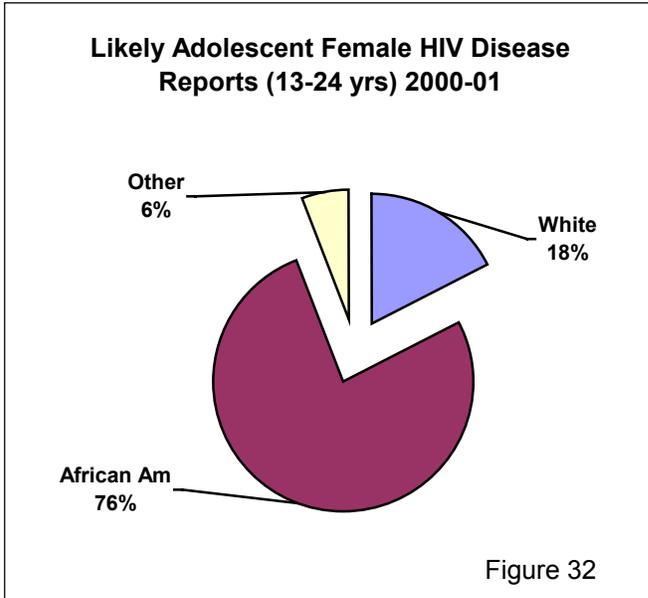
While relative risk for White non-Hispanics heterosexuals is arguably lowest among all the risk groups discussed in this chapter, increases have been observed in reports for both males and females. White heterosexuals represented less than 1% of male reports in 1983-1989 and almost 4% of reports in 2000-2001. White heterosexuals represented about 10% of female reports in 1983-1989 and almost 12% of reports in 2000-2001 (Table 10A, 11A, pp. 57 and 60).

White IDU

While about 10% of female cases (excluding NIRs) were attributed to IDU among White non-Hispanics the 1990-1991 period, this percentage has decreased to about 4% for 2000-2001 reports (Table 10A, pg. 57). The percentage of all male cases (excluding NIRs) attributed to IDU and MSM/IDU among White non-Hispanics dropped from about 8% in 1990-1991 period to almost 4% in 2000-2001 (Table 11A, pg. 60).

Special At-Risk Populations

Adolescents

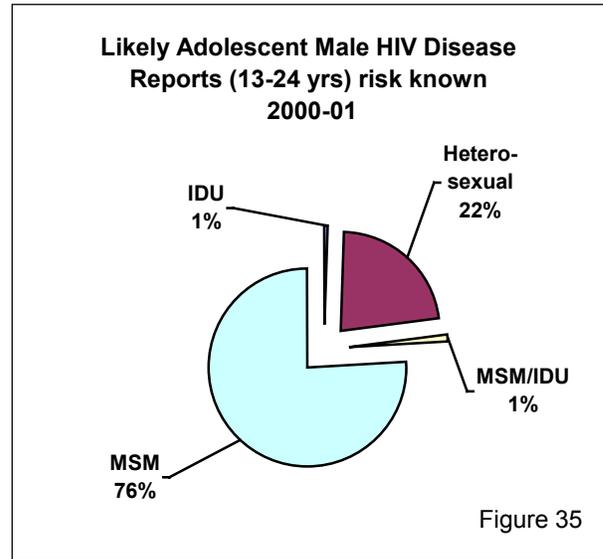
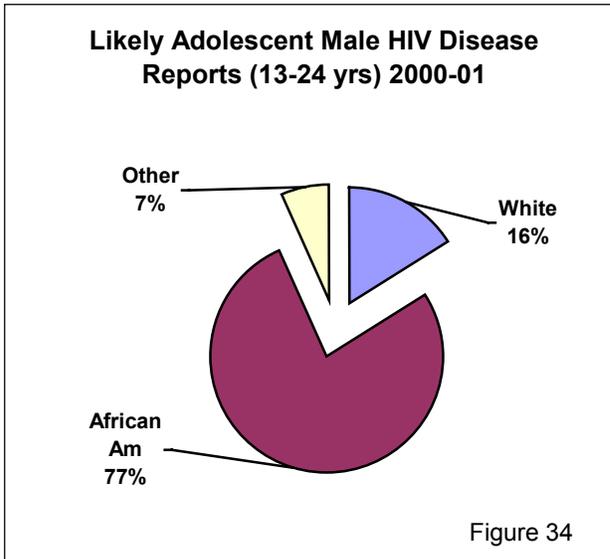


Tables 17 (pg. 66) and Figures 32, 33, 34, and 35 display the percentage of new *HIV disease* reports by risk and demographic categories for each sex for individuals aged 13-24 years at time of report. Because there can be significant delay in infection and subsequent testing and reporting, it is felt that the age group 13-24 years better describes infections that likely occurred during adolescence. In 2000-2001, while only just over 1% of reports are found among teenagers aged 13 to 19, the percentage increases to over 7% of all cases if 20-24 year olds are included (Table 2, pg. 46). The high prevalence of other STDs (gonorrhea and chlamydia) among adolescents (13-19 years), especially among African Americans as well as the troubling number of pregnancies to unmarried teenagers, indicates some risk-taking behaviors by individuals in this age group (Table 4, pg. 48). This sexual activity of teens and the concomitant STDs put teens at risk for acquiring STDs, including HIV infection.

For adolescent females, the proportion of *HIV disease* reports attributed to heterosexual contact has increased and in 2000-2001 accounted for over 94% of the cases.

The proportion of adolescent African American females with HIV was 6 times greater than that of White non-Hispanic females.

For adolescent males, the proportion of *HIV disease* reports attributed to MSM risk has increased and in 2000-2001 accounted for 75% of the reports. The proportion of adolescent African American males was 5 times greater than that of White non-Hispanic males. HIV infection attributed to heterosexual contact has increased since the early 1990s, however among male adolescents, HIV infections attributed to male-to-male sexual contact are most common.



Chlamydia Among Adolescents

Between 40% and 45% of all chlamydia cases reported were for 13-19 year olds, with an additional 46% to 50% of the cases reported for 20-29 year olds. While the proportion of cases for 13-19 year olds was less than for 20-29 year olds, the rates for 13-19 year olds was higher. The rates for 13-19 year olds increased from 801/100,000 in 1990-91 to a maximum of 1,307/100,000 in 1998-99 and then declined slightly to 1,187/100,000 in 2000-01. This age group represented the highest report rates recorded in all years.

Within the 13-19 year olds reported, the racial distribution is quite similar to the distribution for all cases, but the gender distribution is skewed even more heavily toward females (91% to 94% of the reported cases are for women). The gender distribution did not change significantly over the years analyzed, however.

Gonorrhea Among Adolescents

Just as for chlamydia, the age groups primarily affected by gonorrhea are the 13-19 year olds and 20-29 year olds. The decline has not been a linear process, but instead has been one where there were slight increases followed by a decrease. The overall trend has been an unmistakable decline, though. Just as was described for chlamydia, the 20-29 year old group had the highest proportion of cases reported (between 45% and 50% of the cases) and 13-19 year olds account for 27% to 33% of the reported gonorrhea.

The 13-19 year old group had the same racial proportions as the total report population, but the gender distribution was skewed more toward females. In 1990-91, 53% of the gonorrhea reports were for females. However, by 2000-01, 66% of the reports for 13-19 year olds were females. The shift in gender proportion in this age group may represent additional screening opportunities for gonorrhea resulting from the targeted screening for young women for chlamydia. Similar to chlamydia, the incidence rate for gonorrhea among 13-19 year olds was higher than any other age group for approximately the first

half of the 1990s. In 1990-91, the rate for 13-19 year olds was 1,749/100,000 but the rate reported for 2000-01 had declined to 629/100,000, a decline of 64%.

Syphilis Among Adolescents

Unlike chlamydia and gonorrhea in North Carolina, early syphilis reports are not found with a high proportion among 13-19 year olds. Instead the predominant age groups reported were the 20-29 year old group and the 30-39 year old group. The relative proportions have changed over time. In 1990-91 the 20-29 year old group represented 49% of the cases and 30-39 year olds accounted for 27% of the reports. Thirteen to nineteen year olds made up 12% of the reports and 40-49 year olds accounted for 8% of the reports. For 2000-01, the 20-29 year old group represented 29% of the reports, 30-39 year olds made up 35% of the reports and the 40-49 year old group was represented in 20% of the reports. The 13-19 year old group accounted for 7% of all early syphilis reports in 2000-01.

Within the 13-19 year old group, the racial/ethnic distribution of cases was quite similar to the distribution noted for all ages. However, the gender distribution is markedly different. The male-to-female ratio for 13-19 year olds varied from 33% : 67% in 1990-91 to 23% : 77% in the 2000-01 biennium. The early syphilis incidence rate for 13-19 year olds declined from 60/100,000 in 1990-91 to 9.1/100,000 in 2000-01, a decline of approximately 85%. The incidence rate change for all ages declined by 72% over the same time period.

Summary STD Among Adolescents

Sexually transmitted disease incidence among persons 13-19 years of age varies dramatically by disease. Two of the bacterial STDs, chlamydia and gonorrhea, have generally had their highest rates reported for 13-19 year olds. Chlamydial infections still are found with highest incidence in this age group, while gonorrhea reports are now superceded by 20-29 year olds. For both diseases, the rates for 13-19 and 20-29 year olds are at least twice the rates reported for any of the remaining age groups. Rates for infectious syphilis and *HIV disease* are dramatically lower than the previously mentioned STDs. For all of the STDs, the racial/ethnic distribution found in 13-19 year olds (13-24 for *HIV disease*) was similar to the distribution for all age groups reported. However, the gender ratios found in all of the STDs reported here represent a greater proportion of females than was found for all ages as a whole. Reported incidence rates for chlamydia have risen over the entire time period reported here, but there was a decline noted from 1998-99 to the 2000-01 biennium. For two of the other STDs (gonorrhea and syphilis), reported incidence rates declined over the entire time period. *HIV disease* rates increased from the initial 1990-91 average rate until 1994-95, then have declined and remained relatively level over the past four years

Other Minorities

As mentioned earlier, two racial/ethnic minorities besides African Americans are disproportionately represented in the HIV morbidity data: Hispanics and American Indians.

The case rate per 100,000 population for Hispanics or Latinos is just over 2½ times the rate for White non-Hispanics (Table 3, pg. 47). Although the case rate for Hispanics appears to be decreasing from earlier years, this may be due to the fact that the population estimates for Hispanics may not have reflected the true populations; thus the case rates in earlier years may have been overstated. Regardless, the rapid growth of this population group in the state and the special needs associated with it dictate that careful attention be paid to any available information. At this time, case numbers are insufficient to determine significant trends. Another complicating factor is that almost 45% of the female Hispanic cases in 2000-2001 and 40% of the male cases were reports without identified risk (NIR). Of all cases for Hispanic males, MSM and heterosexual contact were both about 30% of the total. Of all cases for Hispanic females, about 35% listed heterosexual contact as the risk and about 15% listed IDU.

The case rate per 100,000 population for American Indians was almost 3 times that for non-Hispanic Whites. This yearly rate is considered somewhat unstable since it represents less than twenty cases and can fluctuate considerably from year to year. There has been a recent outbreak of syphilis cases among American Indians; thus there is concern about any changing patterns that might emerge for HIV.

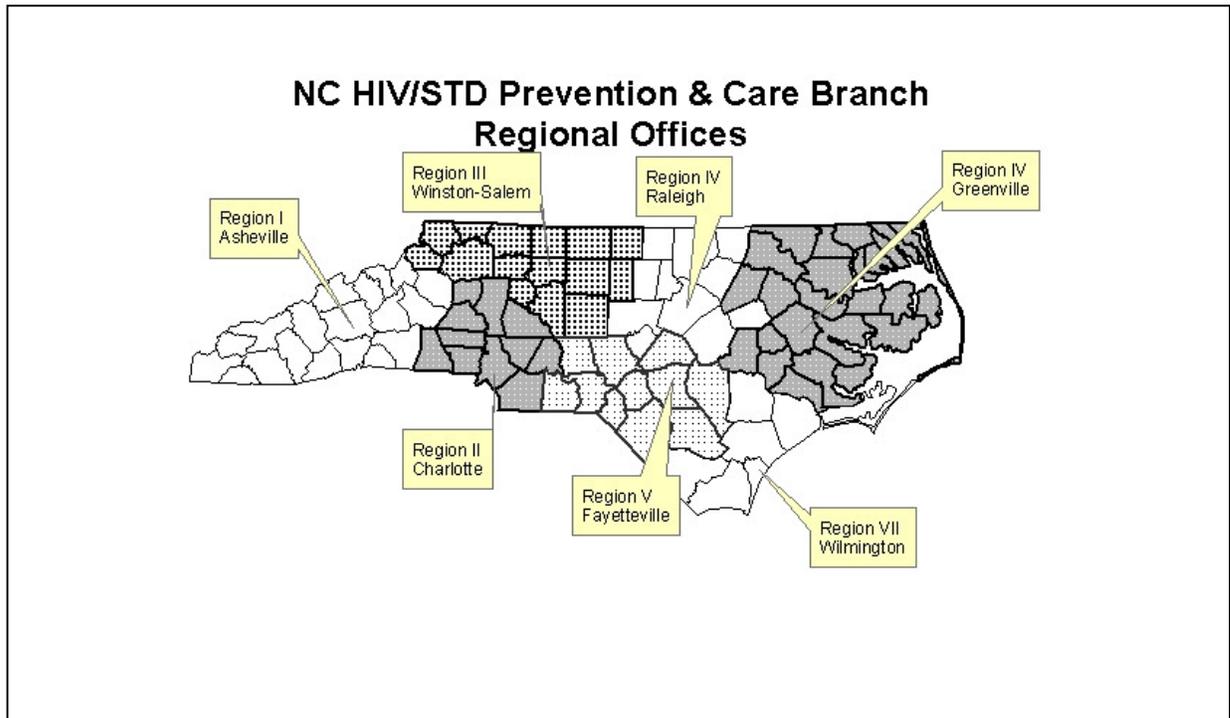
Pediatric HIV

Pediatric *HIV disease* reports are for those individuals who are less than 13 years old at the time of diagnosis. Through 2001, 238 (Table 2, pg. 46) pediatric HIV infections have been reported. An additional 8 reports were reported with an age greater than 12 years, but indicated a pediatric mode of exposure. These reports are added to the initial 238 for the display of risk information in Table 18 (pg. 67). Table 18A (pg. 67) displays only those reports which listed the mother with or at risk of HIV and the child was less than 5 years of age at diagnosis. This table likely represents the *HIV disease* reports that were the result of perinatal transmission. In the early 1990s, as the number of HIV-infected women continued to grow, the number of HIV-infected infants also grew. However, as physicians became aware that AZT can reduce vertical transmission during pregnancy and as better treatments became available, the numbers of new cases of HIV in infants decreased from the peak years of 1992-1993 to only one report per year for recent years.

Table 18 (pg. 67) displays pediatric HIV cases by exposure category and race. The proportion of pediatric cases among African Americans is higher for those with an exposure category of “mother with/at risk for HIV infection” than for Whites. Most of the pediatric cases with hemophilia/coagulation disorder are among Whites. Approximately equal numbers of cases with a risk of transfusion/transplant are found among both Whites and African Americans. The proportion of pediatric cases reported since 1990 has increased for the exposure group “mother with/at risk for HIV infection”, while the proportion with a risk of hemophilia/coagulation disorder or transfusion/transplant has decreased to few or no reports in recent years.

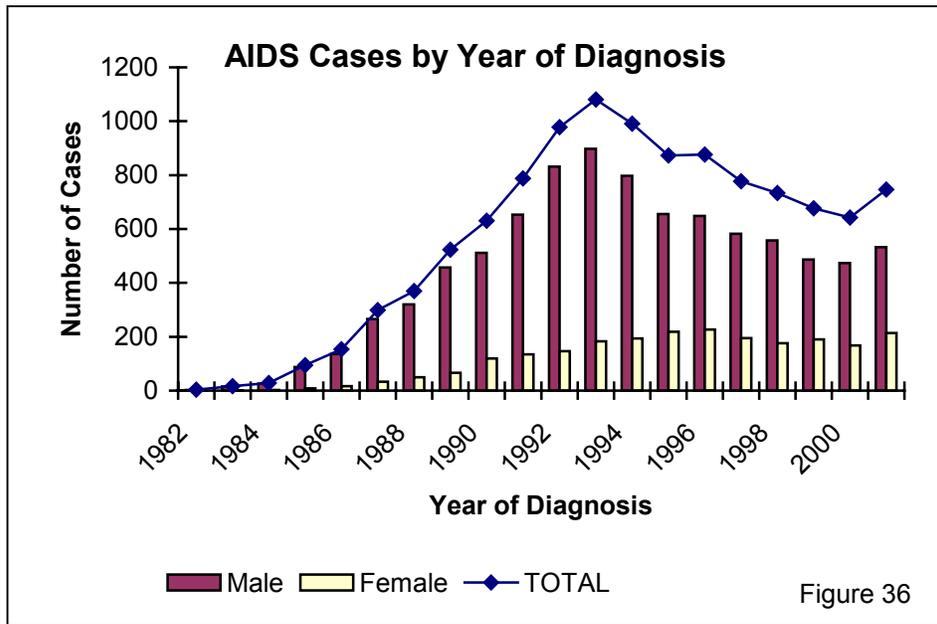
Regional Level Data

Because North Carolina communities vary across the state, demographic and risk information can vary too. Information about HIV morbidity and demographics has been prepared and is displayed for different regions of the state in Tables 26-32 (pp. 78-96). Counties are assigned to regions based on proximity and activities of the field staff of the HIV/STD Prevention and Care Branch. Current regional assignments are displayed below.



V. AIDS

As of December 31, 2001, a total of 11,158 cases of AIDS had been reported in the state with North Carolina as residence at the time of diagnosis. In 2001, 871 new AIDS cases were reported. About 53% of these new AIDS cases represented new individuals reported (*HIV disease*); the remaining 47% represented individuals who had been previously reported as infected with HIV but who now had an AIDS diagnosis (Table 19, pg. 68). The 871 reports for 2001 represented a 28% increase in AIDS reports from 2000. Part of this increase may reflect a change in reporting procedures. In 2001, the Epidemiology and Special Studies Unit began actively following up laboratory test results indicating a possible AIDS diagnosis for individuals. This enhanced surveillance follow-up review may have shortened the time of initial entry of new cases into the reporting system. In light of this reporting change, a better method to follow the trends in new cases would be to categorize cases by the date of diagnosis rather than the date of report. It is important to remember that reporting delays can cause changes in the report totals for recent years using this method. In North Carolina, diagnosed cases are sometimes not reported to the HIV/STD Prevention and Care Branch in a timely manner. For instance, for cases reported between 1990 and 1994, 47% were reported within 3 months of diagnosis, and 78% were reported within 12 months of diagnosis. By comparison, CDC reports nationally that 50% of cases are reported to CDC within 3 months and 80% within one year. Figure 36 demonstrates the number of new AIDS



cases in North Carolina by gender and by *year of diagnosis* for reports received by March 31, 2002. Care must be taken in interpreting Figure 36, as a few reports for cases diagnosed during 2000,

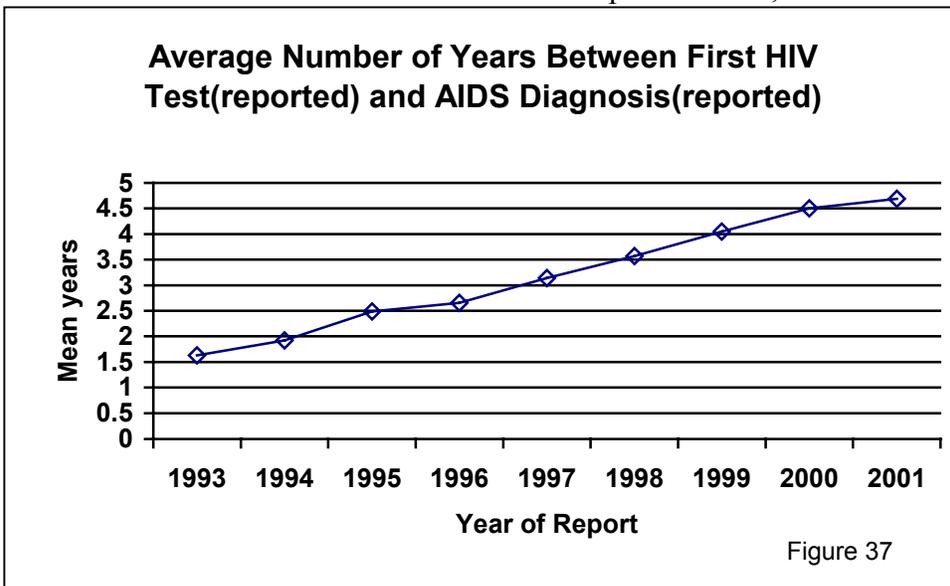
2001 and earlier are still arriving in our office. In reviewing the data, there does appear to be a 16% increase in AIDS reports for cases diagnosed in 2001 as compared to cases diagnosed in 2000. This reverses the downward trend in AIDS reports that had been observed earlier. This increase in reports may indicate that more individuals are not receiving effective treatments or that current treatments are not as effective as they were

earlier. Close attention should be paid to the demographic changes in AIDS cases, especially by agencies that provide care services for clients.

White males made up the single largest demographic group (46%) of AIDS cases in the 1983-1989 period. This proportion has dropped to only 17% of AIDS cases in 2000-2001. The ethnicity of AIDS has shifted from almost 50% African American for cases reported between 1983 and 1989 to 73% African American among cases reported in 2000-2001 (Table 21, pg.70). Although almost all of the AIDS cases reported in the early part of the epidemic were males, this demographic has changed over time. For example, males comprised 89% of the cases reported between 1983-1989, 84% of cases reported for 1992-1993 and 73% in 2000-2001. African American males made up 51% of AIDS cases reported in 2000-2001 (Table 21, pg.70) and African American females made up 21% of AIDS cases reported during the same time period (Table 21, pg.70). These proportions represent significant disparities for African Americans. Table 22 (pg. 71) displays the AIDS case rates for different demographic groups. The AIDS case rate for African Americans is about 11 times that for White non-Hispanics. The case rate for American Indians is about 4 times that for Whites, and the case rate for Hispanics is about twice that for Whites.

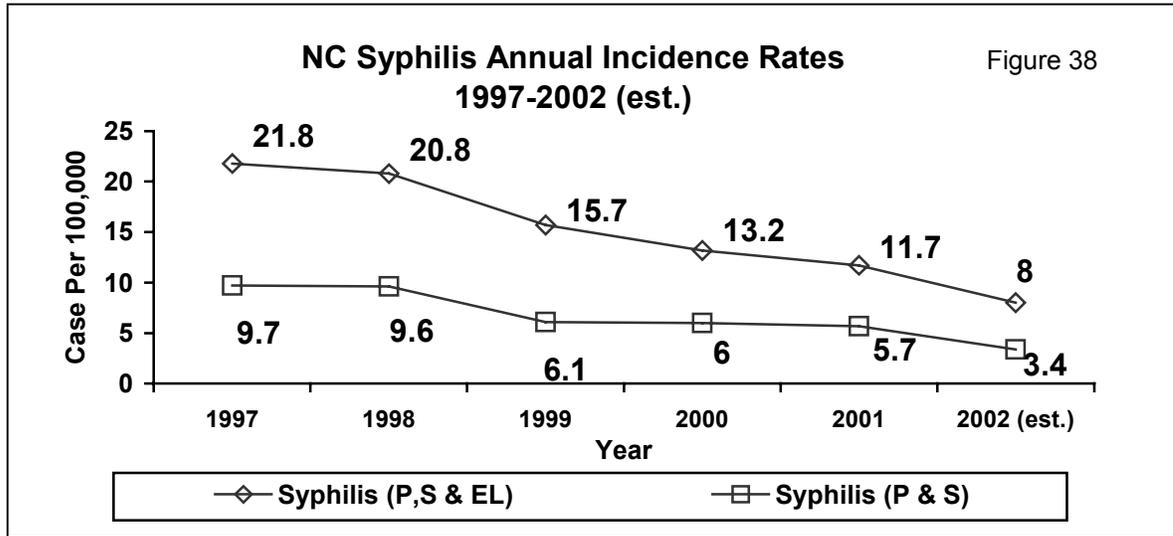
Treatment

As mentioned earlier, the introduction of new more effective AIDS treatments has made a tremendous impact on delaying the progression of HIV to AIDS. This was evident in national surveillance data, as AIDS incidence and deaths dropped for the first time in 1996. North Carolina surveillance data also suggest that these treatments are having an impact. Figure 35 shows the average number of years between a report with HIV and a report with AIDS. The increase in the time indicates that these new treatments are likely having an impact and slowing the progression from HIV to AIDS. It should be noted that the rate of increase has slowed in the last time period. This, like the increase in AIDS



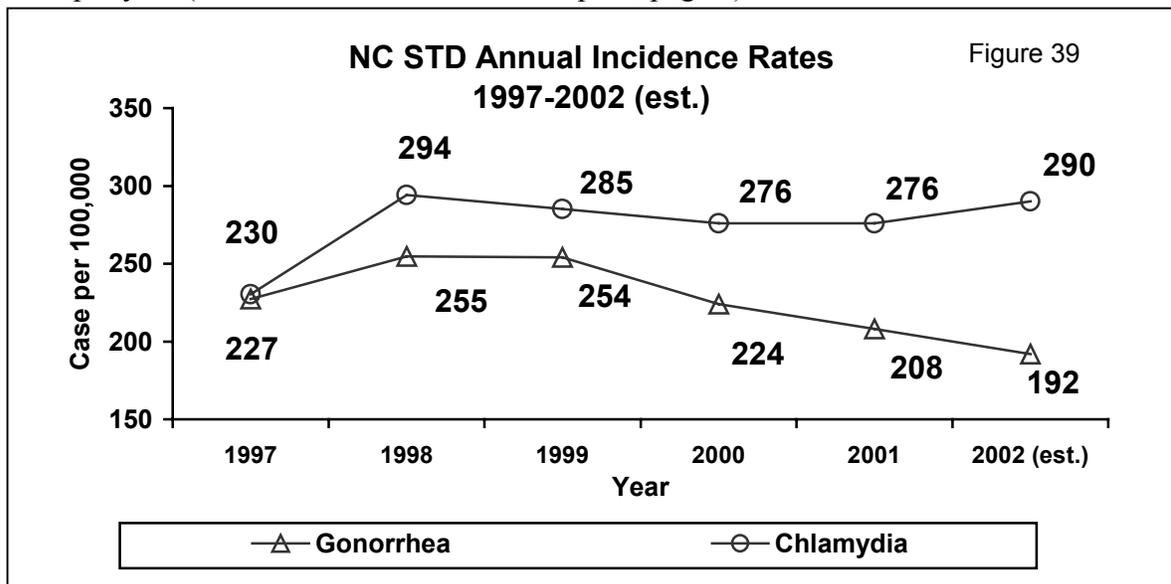
reports, could indicate changes in treatment effectiveness or delivery of AIDS care. It will be important to monitor these trends closely in the near future.

VI. NORTH CAROLINA BACTERIAL STD TREND ANALYSIS



Reports for syphilis declined statewide in North Carolina between January 1997 and December 2001. This decline was noted for all age groups and both genders, but exceptions were noted for some racial/ethnic groups. There was a slight decrease in the overall rate for gonorrhea for the same time period, with small increases noted for several stratified groups.

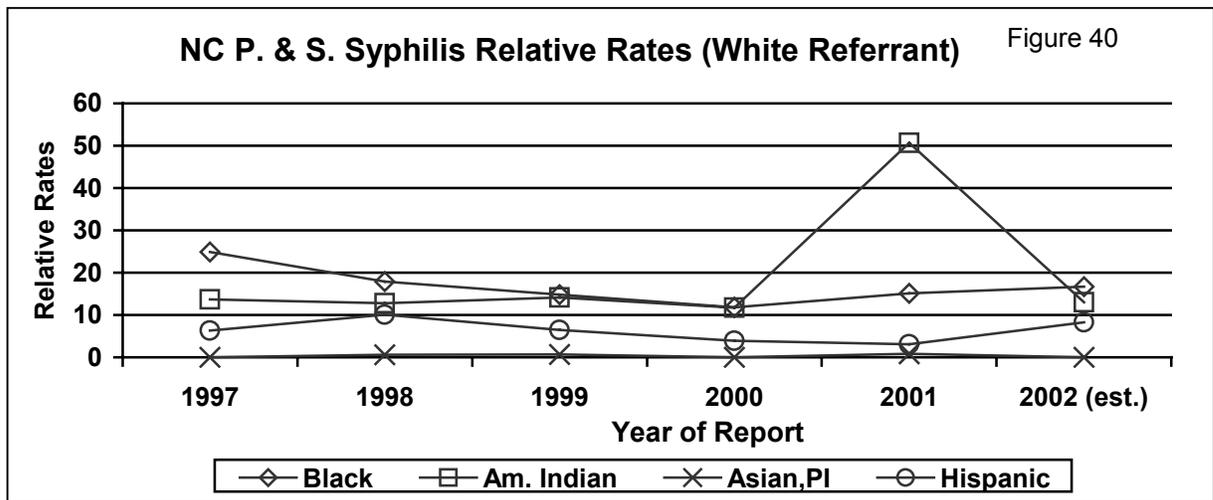
Specifically, the reported primary, secondary syphilis (P/S) rate declined by 41% from 1997 to 2001 (the early syphilis rate decreased by 46% during the same time period) (Figure 38). For American Indians, the P/S syphilis rate increased over 200% (19 cases to 58 cases reported) from 1997 to 2001 (see *2001 STD Surveillance Report*, page 1). In reality, the dramatic increase occurred in the 2001 reporting period. Congenital syphilis reports remained essentially unchanged based on year of birth for the past two years at 19 cases per year (see *2001 STD Surveillance Report*, page 3).



As stated earlier, the overall gonorrhea report rates decreased slightly (-8%) from 1997 to 2001. Gonorrhea rates varied over the time period reported by both race/ethnicity and age group. There was a decrease noted for most demographic groups between 2000 and 2001.

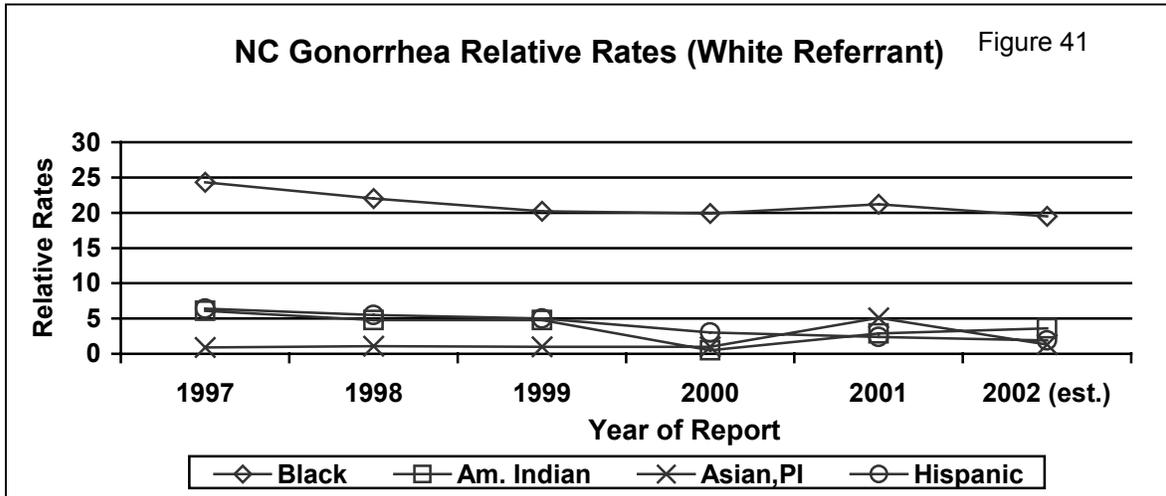
The data for chlamydia are not as clear-cut as for the other STDs. The reported incidence rate for chlamydia has increased from 1997 through 2001, with a stronger increase noted from 1996 to 1998. However, we believe that the increase was due to increased screening for chlamydia implemented through the Infertility Prevention Program in earlier years. The recent rates (since 1998) have been nearly level and may represent a steady-state reporting rate for chlamydia. Increased screening for chlamydia may have also indirectly affect the rates for gonorrhea, as some providers offer testing for both when screening.

Incidence and rates were projected for 2002 from reports received through June 30, 2002 for syphilis, gonorrhea and chlamydia and are also included in Figures 38, 39 and Table 33 (pg. 99). Based on these projections, we expect an additional 40% decrease in P/S syphilis cases from 2001 to 2002. A rate decrease is expected for all racial/ethnic groups except for Hispanics. We expect a 25% decrease in early latent cases for 2002 relative to 2001 reports, with rate decreases noted for all subgroups.



The incidence rates for primary and secondary syphilis and gonorrhea for 2001 (5.7 cases per 100,000 and 208 cases per 100,000 respectively) and the projected rates for 2002 (P/S syphilis rate of 3.4 per 100,000 and gonorrhea rate of 192 per 100,000) place North Carolina as a high-incidence state. Preliminary data from the CDC (Draft in spring of 2002) for 2001 indicate that North Carolina ranks 5th (behind California, Florida, New York and Texas) in number of primary/secondary syphilis cases reported. For 2001, North Carolina also ranks 5th with respect to the rate of primary/secondary syphilis.

All STDs disproportionately affect the minority community. Incidence rates (year 2001) for gonorrhea and syphilis for some minorities are 12-20 times the rates for Whites and rates for chlamydia cases among minorities are up to 9 times that for Whites (see *2001 STD Surveillance Report*, pp. 1-5). Relative rates (rate ratios) were calculated for all racial/ethnic groups for P/S syphilis, gonorrhea and chlamydia. Over the five-year period of 1997-2001, the Black/White rate ratios for primary/secondary syphilis and gonorrhea decreased (Figures 40 and 41). Rate ratios for other racial/ethnic groups did not represent a clear trend over the entire time period.



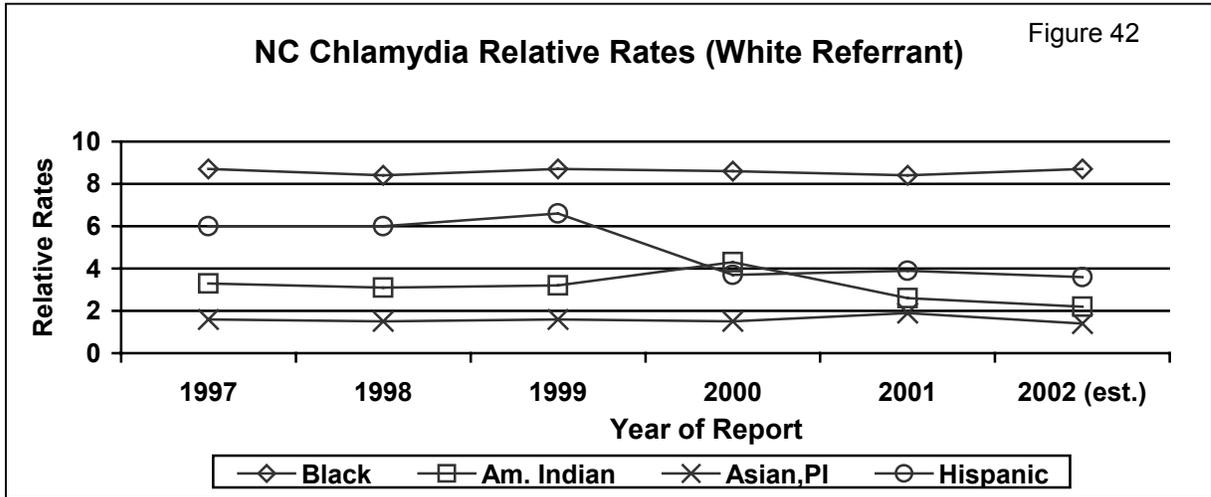
The dramatic increase in rate ratio for American Indians noted for 2001 is primarily a result of syphilis reports from Robeson County, which has a large American Indian community. From 1997 to 2001, there appears to be a tendency for a greater proportion of chlamydia cases to be reported for Hispanics than previously (Figure 42), although the rate ratio changes are not statistically significant. There was no significant change in the male/female rate ratio for any of the diseases over the five-year period.

The bacterial STDs all have similar geographic distributions (Figure A-2, pg. 44). Regions 5, 6 and 7 have the highest rates of chlamydia and Regions 4, 5 and 6 reported the highest gonorrhea rates for 2001.

Regions 5 and 7 reported the highest rates of primary/secondary syphilis for 2001. While the number of infectious syphilis (P/S & EL) cases decreased slightly statewide during January - December 2001 compared to the same time period of 2000, Region 7 reported more cases of early syphilis. For the state, there was an overall decrease of 32% of early syphilis cases reported from January through June of 2002 compared to the same time period in 2001, but 18 counties reported increases.

Durham County had an increase of 16 cases (19 to 35), while Moore County increased by 10 cases and Orange County increased by 4 cases. The remaining county increases were the result of an additional three cases or less (Table 33, pg. 99). Five counties reported 50% of the early syphilis cases in North Carolina during January – June 2001. In

decreasing order of number of reports, these counties are Robeson (Region 5), Mecklenburg (Region 2), Durham (Region 4), Guilford (Region 3) and Wake (Region 4). Another eight counties accounted for an additional 25% of the cases (Table 34, pg. 102).



The age distribution for infectious syphilis has changed over the past five years. The rate ratios (Table 35, pg. 103) indicate an increasing proportion of cases in the 30-39 and 40-49 year old age groups for four years in the five-year period. This shift from the 20-29 year old group has been noted on a national basis. Similarly, the age distribution for chlamydia and gonorrhea reports has also started to shift away from the predominant 13-19 year old group. In North Carolina, incidence rates (2001) for 13-19 year olds are approximately 620 cases/100,000 for gonorrhea and 1,200 cases/100,000 for chlamydia. Over the past few years, a greater proportion of the chlamydia cases have been reported among 20-29 year olds.

North Carolina Disease STD Trend Highlights

- ◆ Annual syphilis (P/S) and gonorrhea rates declined between 1997 and 2001 by 41% and 15%, respectively.
- ◆ Congenital syphilis reports increased by 6% between 1997 and 2001 (based on year of birth), from 18 to 19.
- ◆ The implementation of chlamydia screening across the state has resulted in an increase of chlamydia reports, making it very difficult to identify an epidemiologic trend for this disease.
- ◆ Gonorrhea and syphilis incidence rates among minorities are approximately 12-20 times the rates for Whites. Earlier decreases noted for the rate ratios have been replaced with essentially no change in ratio or slight increases in the ratio of some racial/ethnic minority rate to White rates.
- ◆ Regions 5 and 6 have the highest rates of syphilis in North Carolina, while Regions 4, 5 and 6 have the highest rates of gonorrhea. Regions 5, 6 and 7 have the highest rates of chlamydia.
- ◆ Robeson, Mecklenburg, Durham, Guilford and Wake counties accounted for over 50% of all infectious syphilis cases during the first six months of 2002.
- ◆ The age distribution for all STDs, especially syphilis, has generally shifted to an older

age group over the past five years. P/S syphilis rates were higher in the 30-39 year old age group in 1997 through 1999, while the 20-29 year old age group had the highest rate in previous years. A slightly higher rate, however, was noted for 20-29 year olds in 2000.

VII. SUMMARY and CONCLUSIONS

In 2001, 1603 new individuals were reported with *HIV disease* (HIV and AIDS) in the North Carolina. This brings the estimate of those living with the disease in the state to about 15,000 to 20,000 persons as of December 31, 2001. While nationally the HIV epidemic is found mostly in large urban areas, in North Carolina as well as other states in the South, it is also found in rural areas. In North Carolina almost 25% of the HIV cases come from rural or non-metropolitan counties. HIV is a disease that affects people across the state, but the impact is not evenly shared. HIV disproportionately affects minorities and certain demographic groups.

The persons most likely to become infected with HIV are those who engage in high-risk disease-transmitting behaviors with persons in communities that have a high prevalence of HIV infection. Of all new reports in 2000-2001 where risk is known, the group that represents the largest proportion of reports is African American heterosexuals, who accounted for almost 40% of reports. This risk category includes some reports that were assigned to a *presumed heterosexual risk* based on additional data collected during patient interview and follow-back. African American men who have sex with men (MSM) accounted for about 20% of reports in 2000-2001 where risk is known; White non-Hispanic MSM accounted for an additional 14% of reports. African Americans who are injecting drug users (IDU) accounted for almost 11% of reports, and White heterosexuals accounted for just over 6% of reports. The proportions alone do not fully describe the impact of HIV on these groups or relative risk because these groups are not equally represented in the overall population. African American make up about one-fourth of the population and are disproportionately represented in all risk groups. MSM and IDU represent much smaller proportions of the population than heterosexuals. This means that prevalence is higher among African American MSM than White MSM and African American heterosexuals. The IDU populations are very small, and thus the prevalence among these groups is likely highest among the risk categories.

How these proportions are changing over time is very important to understanding the epidemiology of *HIV disease* and planning future prevention actions. While White MSM accounted for almost all of the reports in the early part of the epidemic, their proportion has decreased since but remains fairly stable at 16% of new reports. Reports for African American MSM have remained a comparatively consistent proportion of reports throughout the epidemic and account for about 21% of all new reports. Reports for African American heterosexuals have increased the most significantly since the beginning of the epidemic, and this increase appears to be continuing. Given the high rates of other STDs among minority heterosexuals in the state, this increase in HIV reports is especially troubling and bears careful attention. Although the proportion of

HIV reports attributed to injecting drug use risk has decreased considerably since the early 1990s and the decrease appears to be continuing, the prevalence of HIV among this group remains high.

Because the level of risk-taking behaviors is an essential component of identifying “who is at greatest risk” and may vary significantly from community to community, it is important for members of the community itself to be involved in designing and implementing prevention programs. Developing independent measures for these risk behaviors is a valuable tool that can help in the decision making process for planning activities. Supporting other programs or agencies that collect similar data and encouraging the sharing of information can be very beneficial to overall community health planning.

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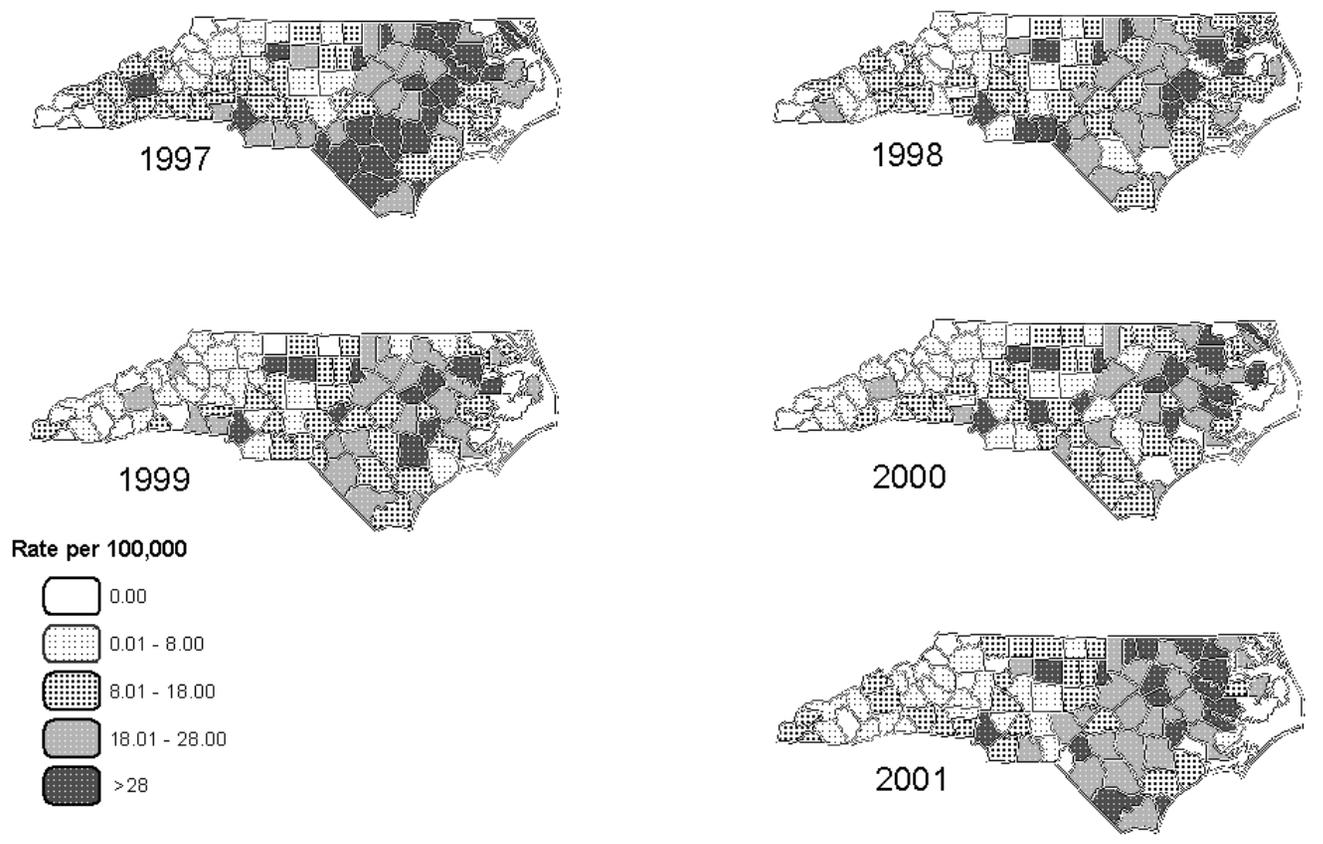
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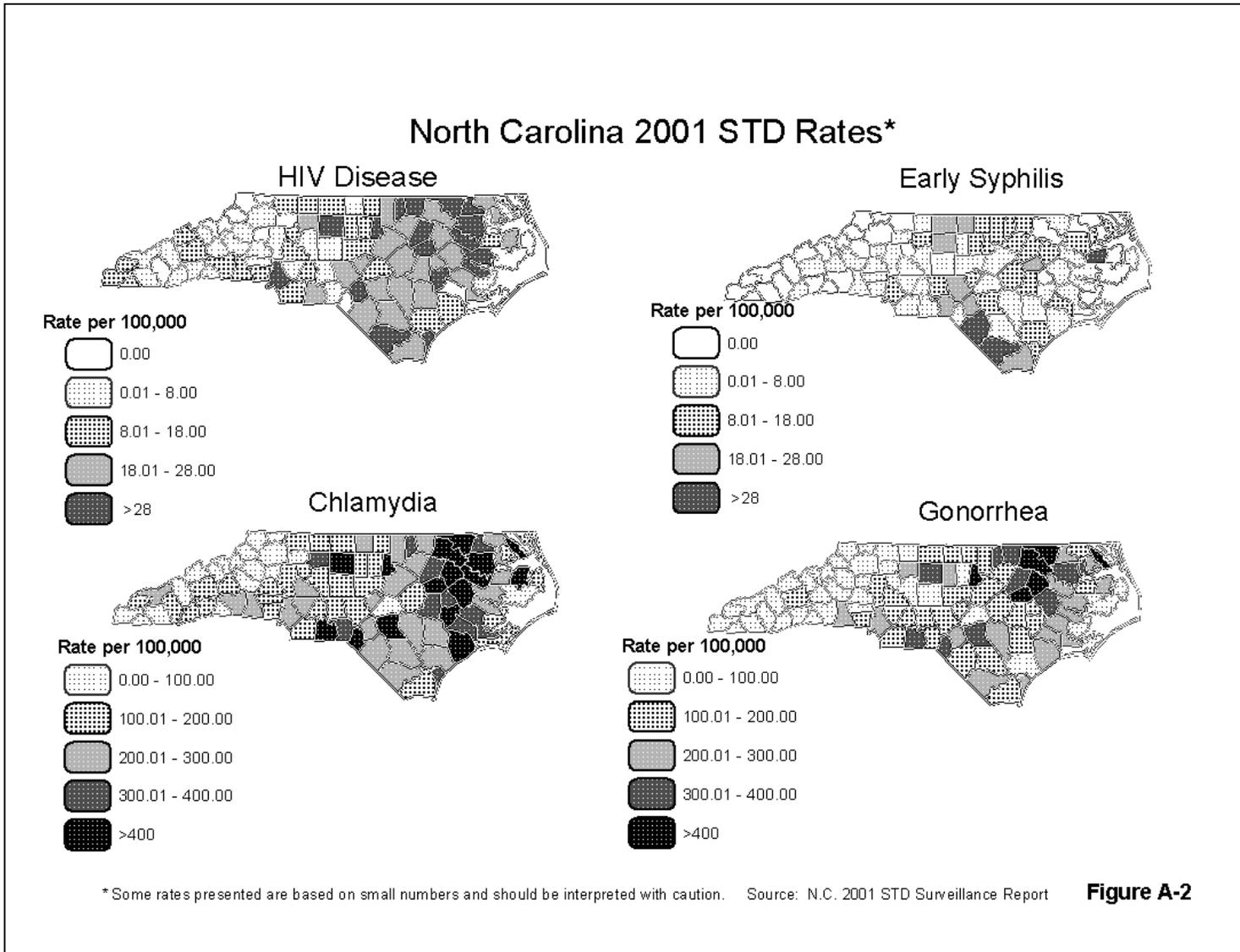
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North Carolina HIV Disease Rates*



*Some rates presented are based on small numbers and should be interpreted with caution. Source: N.C. 2001 STD Surveillance Report

Figure A-1



2003 NCCPG Epidemiologic Profile

Table 1 : N.C. HIV Disease Reports by Year of Report (Type of Initial Report)																		
Report Category	Year First Report																	
	83-89		90-94		1995		1996		1997		1998		1999		2000		2001	
	Rpts	%	Rpts	%	Rpts	%	Rpts	%	Rpts	%	Rpts	%	Rpts	%	Rpts	%	Rpts	%
HIV non-AIDS	2	0	3,854	42	1,200	54	908	55	959	58	868	59	937	61	966	66	1,032	64
AIDS only	1,173	99	3,733	41	629	28	479	29	471	28	435	29	474	31	377	26	461	29
HIV, then AIDS	10	1	1,600	17	410	18	254	15	224	14	172	12	134	9	121	8	110	7
Total	1,185	100	9,187	100	2,239	100	1,641	100	1,654	100	1,475	100	1,545	100	1,464	100	1,603	100

Table 2 : N.C. HIV Disease Reports by Year of Report (Age Group by Gender)

Male																
Age group	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
0-4	9	0.8	5	0.2	29	0.7	22	0.5	21	0.6	7	0.2	3	0.1	96	0.4
05-12	4	0.3	4	0.1	4	0.1	4	0.1	4	0.1	2	0.1	3	0.1	25	0.1
13-19	9	0.8	21	0.8	39	0.9	32	0.7	25	0.8	32	1.1	38	1.2	196	0.9
(13-24)*	(65)	(5.5)	(208)	(7.5)	(247)	(5.7)	(256)	(5.9)	(173)	(5.3)	(181)	(6)	(224)	(7.3)	(1,354)	(6.2)
20-29	250	21	643	23	799	18	696	16	475	14	410	14	432	14	3,705	17
30-39	467	39	990	36	1,515	35	1,422	33	919	28	813	27	747	24	6,873	31
40-49	212	18	355	13	671	15	697	16	592	18	542	18	595	19	3,664	17
50+	102	8.6	120	4.3	177	4.1	228	5.3	202	6.1	216	7.2	254	8.3	1,299	5.9
Total	1,053	89	2,138	77	3,234	74	3,101	72	2,238	68	2,022	67	2,072	68	15,858	72
Female																
Age group	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
0-4	8	0.7	6	0.2	38	0.9	12	0.3	17	0.5	12	0.4	3	0.1	96	0.4
05-12	1	0.1	3	0.1	4	0.1	4	0.1	6	0.2	1	0	2	0.1	21	0.1
13-19	2	0.2	36	1.3	62	1.4	66	1.5	63	1.9	59	2	38	1.2	326	1.5
(13-24)*	(9)	(0.8)	(127)	(4.6)	(227)	(5.2)	(246)	(5.7)	(223)	(6.8)	(168)	(5.6)	(154)	(5)	(1,154)	(5.2)
20-29	31	2.6	239	8.6	409	9.4	427	9.9	334	10	259	8.6	253	8.2	1,952	8.9
30-39	63	5.3	257	9.3	405	9.3	437	10	378	12	360	12	378	12	2,278	10
40-49	15	1.3	60	2.2	142	3.3	193	4.5	193	5.9	233	7.7	212	6.9	1,048	4.8
50+	12	1	36	1.3	51	1.2	66	1.5	66	2	74	2.5	109	3.6	414	1.9
Total	132	11	637	23	1,111	26	1,205	28	1,057	32	998	33	995	32	6,135	28
Both Sexes (Total)																
Age group	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
0-4	17	1.4	11	0.4	67	1.5	34	0.8	38	1.2	19	0.6	6	0.2	192	0.9
05-12	5	0.4	7	0.3	8	0.2	8	0.2	10	0.3	3	0.1	5	0.2	46	0.2
13-19	11	0.9	57	2.1	101	2.3	98	2.3	88	2.7	91	3	76	2.5	522	2.4
(13-24)*	(74)	(6.2)	(335)	(12)	(474)	(11)	(502)	(12)	(396)	(12)	(349)	(12)	(378)	(12)	(2,508)	(11)
20-29	281	24	882	32	1,208	28	1,123	26	809	25	669	22	685	22	5,657	26
30-39	530	45	1,247	45	1,920	44	1,859	43	1,297	39	1,173	39	1,125	37	9,151	42
40-49	227	19	415	15	813	19	890	21	785	24	775	26	807	26	4,712	21
50+	114	9.6	156	5.6	228	5.2	294	6.8	268	8.1	290	9.6	363	12	1,713	7.8
Total	1,185	100	2,775	100	4,345	100	4,306	100	3,295	100	3,020	100	3,067	100	21,993	100

* not included in total

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Table 3: North Carolina HIV Disease (Demographic Rates)										
Category	Year of Report									
	1997		1998		1999		2000		2001	
	Cases	Rate [†]	Cases	Rate [†]	Cases	Rate [†]	Cases	Rate [‡]	Cases	Rate [‡]
Age Group										
Missing age	0		0		0		0		1	
00-12 years	14	1.0	18	1.3	4	0.3	9	0.6	2	0.1
13-19 years	50	7.1	51	7.1	40	5.5	42	5.6	34	4.5
20-29 years	387	36.5	358	34.0	311	29.9	318	27.0	367	31.1
30-39 years	661	55.3	551	46.0	622	51.7	535	42.2	590	46.6
40-49 years	389	35.5	365	32.6	410	35.7	381	31.7	426	35.4
50 and over	153	7.7	132	6.4	158	7.5	179	8.1	183	8.3
Total	1,654	22.3	1,475	19.5	1,545	20.2	1,464	18.2	1,603	19.9
Race/Ethnicity										
Missing race	7		3		16		18		15	
White*	400	7.3	360	6.5	375	6.7	327	5.8	353	6.3
African Am. or Black*	1,193	73.3	1,064	64.5	1,088	65.1	1,055	61.2	1,146	66.5
Am. Indian/Al. Native*	13	14.0	10	10.6	17	17.7	12	12.6	17	17.8
Asian/Pacific Islander*	2	2.3	4	4.2	6	5.9	4	3.5	10	8.7
Hispanic or Latino	39	26.5	34	21.0	43	24.5	48	12.7	62	16.4
Total	1,654	22.3	1,475	19.5	1,545	20.2	1,464	18.4	1,603	20.1
* Not Hispanic										
Sex										
Male	1,144	31.7	978	26.7	1,044	28.1	966	24.5	1,106	28.1
Female	510	13.3	497	12.8	501	12.7	498	12.1	497	12.1
Total	1,654	22.3	1475	19.5	1,545	20.2	1,464	18.2	1,603	19.9

[†] per 100,000 population based on U.S. Census Bureau estimates (1990 census reference)

[‡] per 100,000 population using the 2000 U.S. census population

Table 4 : North Carolina STDs (Demographic Rates)

	Early Syphilis		Gonorrhea		Chlamydia		HIV Disease	
	Cases	Rate [†]	Cases	Rate [†]	Cases	Rate [†]	Cases	Rate [‡]
Age Group								
Missing age	1		20		14		1	
00-12 years	0	0.0	36	2.5	64	4.4	2	0.1
13-19 years	61	8.1	4,659	618.7	8,767	1,164.3	34	4.5
20-29 years	266	22.6	8,346	707.9	11,464	972.3	367	31.1
30-39 years	332	26.2	2,417	190.7	1,531	120.8	590	46.6
40-49 years	189	15.7	961	79.9	271	22.5	426	35.4
50 and over	94	4.3	295	13.4	66	3.0	183	8.3
Total	943	11.7	16,734	207.9	22,177	275.5	1,603	19.9
Race/Ethnicity								
Missing race	0		46		179		15	
White*	151	2.7	2,146	38.0	5,633	99.7	353	6.3
African Am. or Black*	644	37.4	13,870	804.9	14,427	837.2	1,146	66.5
Am. Indian/Al. Native*	97	101.7	105	110.1	249	261.2	17	17.8
Asian/Pacific Islander*	1	0.9	223	192.9	214	185.2	10	8.7
Hispanic or Latino	50	13.2	344	90.8	1,475	389.2	62	16.4
Total	943	11.8	16,734	210.2	22,177	278.6	1,603	20.1
* Not Hispanic								
Sex								
Male	504	12.8	8,858	224.7	3,488	88.5	1,106	28.1
Female	439	10.7	7,875	191.8	18,689	455.1	497	12.1
Total	943	11.7	16,734	207.9	22,177	275.5	1,603	19.9

[†] per 100,000 population based on U.S. Census Bureau estimates (1990 census reference)

[‡] per 100,000 population using the 2000 U.S. census population

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Table 5: N.C. Adult/Adolescent HIV Disease Reports by Year of Report (Race/Ethnicity by Gender)

Male																
Race/ Ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
White, nH	537	46	651	24	996	23	902	21	616	19	574	19	514	17	4,790	22
Afr Am, nH	475	41	1,425	52	2,117	50	2,087	49	1,499	46	1,332	45	1,411	46	10,346	48
Am.Ind/AN	7	0.6	17	0.6	30	0.7	26	0.6	11	0.3	19	0.6	20	0.7	130	0.6
Asian/ PI	3	0.3	3	0.1	7	0.2	8	0.2	7	0.2	7	0.2	9	0.3	44	0.2
Hispanic	15	1.3	17	0.6	39	0.9	48	1.1	62	1.9	64	2.1	87	2.8	332	1.5
Unknown	3	0.3	16	0.6	9	0.2	3	0.1	16	0.5	16	0.5	25	0.8	88	0.4
Total	1,040	89	2,129	77	3,198	75	3,074	72	2,211	68	2,012	67	2,066	68	15,730	72
Female																
Race/ Ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
White, nH	22	1.9	104	3.8	172	4	186	4.4	161	5	154	5.1	166	5.4	965	4.4
Afr Am, nH	100	8.6	512	19	885	21	981	23	842	26	803	27	782	26	4,905	23
Am.Ind/AN	0	0	4	0.1	10	0.2	11	0.3	12	0.4	8	0.3	9	0.3	54	0.2
Asian/ PI	0	0	1	0	1	0	3	0.1	3	0.1	3	0.1	5	0.2	16	0.1
Hispanic	1	0.1	4	0.1	0	0	8	0.2	12	0.4	13	0.4	20	0.7	58	0.3
Unknown	0	0	3	0.1	1	0	0	0	4	0.1	3	0.1	8	0.3	19	0.1
Total	123	11	628	23	1,069	25	1,189	28	1,034	32	984	33	990	32	6,017	28
Both Sexes (Total)																
Race/ Ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
White, nH	559	48	755	27	1,168	27	1,088	26	777	24	728	24	680	22	5,755	27
Afr Am, nH	575	49	1,937	70	3,002	70	3,068	72	2,341	72	2,135	71	2,193	72	15,251	70
Am.Ind/AN	7	0.6	21	0.8	40	0.9	37	0.9	23	0.7	27	0.9	29	0.9	184	0.8
Asian/ PI	3	0.3	4	0.1	8	0.2	11	0.3	10	0.3	10	0.3	14	0.5	60	0.3
Hispanic	16	1.4	21	0.8	39	0.9	56	1.3	74	2.3	77	2.6	107	3.5	390	1.8
Unknown	3	0.3	19	0.7	10	0.2	3	0.1	20	0.6	19	0.6	33	1.1	107	0.5
Total	1,163	100	2,757	100	4,267	100	4,263	100	3,245	100	2,996	100	3,056	100	21,747	100

White,nH=White(non-Hispanic) Afr Am=African American or Black (non-Hispanic) Am Ind/AN=American Indian/Alaska Native (non-Hispanic)
Asian/PI=Asian/Pacific Islander (non-Hispanic)

Table 6 : N.C. Adult/Adolescent HIV Disease Reports by Year of Report (Mode of Transmission(unadjusted) by Gender)																
Male																
	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
MSM	625	54	747	27	1,292	30	1,214	29	783	24	753	25	770	25	6,184	28
IDU	174	15	505	18	739	17	596	14	415	13	267	8.9	186	6.1	2,882	13
MSM/IDU	86	7.4	266	9.6	188	4.4	131	3.1	140	4.3	94	3.1	57	1.9	962	4.4
Hemophilia	68	5.8	37	1.3	77	1.8	58	1.4	36	1.1	31	1	28	0.9	335	1.5
Hetero-sex	27	2.3	90	3.3	237	5.6	338	7.9	282	8.7	255	8.5	306	10	1,535	7.1
NIR	60	5.2	484	18	665	16	737	17	555	17	612	20	719	24	3,832	18
Total	1,040	89	2,129	77	3,198	75	3,074	72	2,211	68	2,012	67	2,066	68	15,730	72
Female																
	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
IDU	57	4.9	231	8.4	291	6.8	224	5.3	190	5.9	125	4.2	102	3.3	1,220	5.6
Hemophilia	10	0.9	22	0.8	27	0.6	43	1	35	1.1	29	1	37	1.2	203	0.9
Hetero-sex	44	3.8	163	5.9	352	8.2	517	12	444	14	405	14	377	12	2,302	11
NIR	12	1	212	7.7	399	9.4	405	9.5	365	11	425	14	474	16	2,292	11
Total	123	11	628	23	1,069	25	1,189	28	1,034	32	984	33	990	32	6,017	28
Both sexes																
	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
MSM	625	54	747	27	1,292	30	1,214	29	783	24	753	25	770	25	6,184	28
IDU	231	20	736	27	1,030	24	820	19	605	19	392	13	288	9.4	4,102	19
MSM/IDU	86	7.4	266	9.6	188	4.4	131	3.1	140	4.3	94	3.1	57	1.9	962	4.4
Hemophilia	78	6.7	59	2.1	104	2.4	101	2.4	71	2.2	60	2	65	2.1	538	2.5
Hetero-sex	71	6.1	253	9.2	589	14	855	20	726	22	660	22	683	22	3,837	18
NIR	72	6.2	696	25	1,064	25	1,142	27	920	28	1,037	35	1,193	39	6,124	28
Total	1,163	100	2,757	100	4,267	100	4,263	100	3,245	100	2,996	100	3,056	100	21,747	100

MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men and Inject Drugs IDU=Injection Drug Use
 Hemophilia=Hemophilia, blood products, transplants/transfusions Hetero-sex=Heterosexual contact (CDC Definition) NIR=non-specified risk

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Table 7 : N.C. Adult/Adolescent HIV Disease Reports by Year of Report (Mode of Transmission by Gender)

Male																
Mode of transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
MSM	625	54	747	27	1,292	30	1,214	29	783	24	753	25	770	25	6,184	28
IDU	174	15	505	18	739	17	596	14	415	13	267	8.9	186	6.1	2,882	13
MSM/IDU	86	7.4	266	9.6	188	4.4	131	3.1	140	4.3	94	3.1	57	1.9	962	4.4
Hemophilia	68	5.8	37	1.3	77	1.8	58	1.4	36	1.1	31	1	28	0.9	335	1.5
Hetero-sex	27	2.3	90	3.3	237	5.6	338	7.9	282	8.7	255	8.5	306	10	1,535	7.1
Presumed Hetero-sex	0	0	4	0.1	4	0.1	136	3.2	53	1.6	115	3.8	223	7.3	535	2.5
NIR	60	5.2	480	17	661	16	601	14	502	16	497	17	496	16	3,297	15
Total	1,040	89	2,129	77	3,198	75	3,074	72	2,211	68	2,012	67	2,066	68	15,730	72
Female																
Mode of transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
IDU	57	4.9	231	8.4	291	6.8	224	5.3	190	5.9	125	4.2	102	3.3	1,220	5.6
Hemophilia	10	0.9	22	0.8	27	0.6	43	1	35	1.1	29	1	37	1.2	203	0.9
Hetero-sex	44	3.8	163	5.9	352	8.2	517	12	444	14	405	14	377	12	2,302	11
Presumed Hetero-sex	0	0	1	0	4	0.1	137	3.2	59	1.8	84	2.8	189	6.2	474	2.2
NIR	12	1	211	7.7	395	9.3	268	6.3	306	9.4	341	11	285	9.3	1,818	8.4
Total	123	11	628	23	1,069	25	1,189	28	1,034	32	984	33	990	32	6,017	28
Both Sexes (Total)																
Mode of transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
MSM	625	54	747	27	1,292	30	1,214	29	783	24	753	25	770	25	6,184	28
IDU	231	20	736	27	1,030	24	820	19	605	19	392	13	288	9.4	4,102	19
MSM/IDU	86	7.4	266	9.6	188	4.4	131	3.1	140	4.3	94	3.1	57	1.9	962	4.4
Hemophilia	78	6.7	59	2.1	104	2.4	101	2.4	71	2.2	60	2	65	2.1	538	2.5
Hetero-sex	71	6.1	253	9.2	589	14	855	20	726	22	660	22	683	22	3,837	18
Presumed Hetero-sex	0	0	5	0.2	8	0.2	273	6.4	112	3.5	199	6.6	412	14	1,009	4.6
NIR	72	6.2	691	25	1,056	25	869	20	808	25	838	28	781	26	5,115	24
Total	1,163	100	2,757	100	4,267	100	4,263	100	3,245	100	2,996	100	3,056	100	21,747	100

MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men and Inject Drugs IDU=Injection Drug Use
Hemophilia=Hemophilia, blood products, transplants/transfusions Hetero-sex=Heterosexual contact
Presumed Hetero-sex=Presumed heterosexual contact NIR=non-specified risk

Table 7A : N.C. Adult/Adolescent HIV Disease Reports by Year of Report (Reports with Known Mode of Transmission Only)																
Mode of transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	Rpts	%	Rpts	%												
MSM	625	57	747	36	1,292	40	1,214	36	783	32	753	35	770	34	6,184	37
IDU	231	21	736	36	1,030	32	820	24	605	25	392	18	288	13	4,102	25
MSM/IDU	86	7.9	266	13	188	5.9	131	3.9	140	5.7	94	4.4	57	2.5	962	5.8
Hemophilia	78	7.1	59	2.9	104	3.2	101	3	71	2.9	60	2.8	65	2.9	538	3.2
Hetero-sex	71	6.5	253	12	589	18	855	25	726	30	660	31	683	30	3,837	23
Presumed Hetero-sex	0	0	5	0.2	8	0.2	273	8	112	4.6	199	9.2	412	18	1,009	6.1
TOTAL	1,091	100	2,066	100	3,211	100	3,394	100	2,437	100	2,158	100	2,275	100	16,632	100

MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men and Inject Drugs IDU=Injection Drug Use
 Hemophilia=Hemophilia, blood products, transplants/transfusions Hetero-sex=Heterosexual contact
 Presumed Hetero-sex=Presumed heterosexual contact NIR=non-specified risk

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Table 8 : N.C. Adult/Adolescent HIV Disease Reports (Recent Infections--Gender, Age, Race/Ethnicity, Mode of Transmission)										
Gender										
Year	92-93		94-95		96-97		98-99		00-01	
Sex	Reports	Percent								
Male	1,524	67.6%	1,578	64.8%	1,276	63.5%	1,153	62.0%	1,274	63.5%
Female	732	32.4%	856	35.2%	734	36.5%	706	38.0%	731	36.5%
Total	2,256	100.0%	2,434	100.0%	2,010	100.0%	1,859	100.0%	2,005	100.0%
Age (at first report)										
Year	92-93		94-95		96-97		98-99		00-01	
Age Group	Reports	Percent								
13-19 Years	73	3.2%	88	3.6%	79	3.9%	77	4.1%	71	3.5%
20-29 Years	803	35.6%	807	33.2%	605	30.1%	512	27.5%	545	27.2%
30-39 Years	938	41.6%	999	41.0%	784	39.0%	711	38.2%	721	36.0%
40-49 Years	350	15.5%	413	17.0%	412	20.5%	415	22.3%	459	22.9%
50 and over	92	4.1%	127	5.2%	130	6.5%	144	7.7%	209	10.4%
Total	2,256	100.0%	2,434	100.0%	2,010	100.0%	1,859	100.0%	2,005	100.0%
Race/Ethnicity										
Year	92-93		94-95		96-97		98-99		00-01	
Race/Ethnicity	Reports	Percent								
White, Non-Hispanic	468	20.7%	516	21.2%	444	22.1%	417	22.4%	422	21.0%
Black, Non-Hispanic	1,741	77.2%	1,865	76.6%	1,504	74.8%	1,371	73.7%	1,463	73.0%
Am. Indian/AN	28	1.2%	22	0.9%	16	0.8%	17	0.9%	20	1.0%
Asian, Pacific Is.	3	0.1%	8	0.3%	5	0.2%	9	0.5%	12	0.6%
Hispanic	10	0.4%	22	0.9%	22	1.1%	26	1.4%	56	2.8%
Total	2,256	100.0%	2,434	100.0%	2,010	100.0%	1,859	100.0%	2,005	100.0%
Mode of Transmission										
Year	92-93		94-95		96-97		98-99		00-01	
Mode	Reports	Percent								
MSM	512	22.7%	538	22.1%	441	21.9%	423	22.8%	499	24.9%
IDU	518	23.0%	414	17.0%	350	17.4%	224	12.0%	165	8.2%
MSM/IDU	72	3.2%	68	2.8%	85	4.2%	53	2.9%	36	1.8%
Hemophilia	34	1.5%	59	2.4%	35	1.7%	32	1.7%	40	2.0%
Hetero-sex	323	14.3%	576	23.7%	501	24.9%	461	24.8%	465	23.2%
Presumed Hetero-sex	8	0.4%	257	10.6%	89	4.4%	143	7.7%	303	15.1%
NIR	789	35.0%	522	21.4%	509	25.3%	523	28.1%	497	24.8%
Total	2,256	100.0%	2,434	100.0%	2,010	100.0%	1,859	100.0%	2,005	100.0%

MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men and Inject Drugs IDU=Injection Drug Use Hemophilia=Hemophilia, blood products, transplants/transfusions
Hetero-sex=Heterosexual contact Presumed Hetero-sex=Presumed heterosexual contact NIR=non-specified risk

Table 9 : N.C. Adult/Adolescent HIV Disease Reports by Year of Report (Mode of Transmission by Race/Ethnicity)*														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, Not Hispanic														
MSM	404	34.8%	379	13.8%	626	14.7%	563	13.2%	341	10.6%	335	11.3%	300	9.9%
IDU	27	2.3%	91	3.3%	144	3.4%	122	2.9%	98	3.0%	69	2.3%	61	2.0%
MSM/IDU	42	3.6%	85	3.1%	62	1.5%	35	0.8%	42	1.3%	34	1.1%	22	0.7%
Hetero-sex	17	1.5%	33	1.2%	89	2.1%	122	2.9%	124	3.8%	106	3.6%	91	3.0%
Pre Het-sex	0	0.0%	0	0.0%	1	0.0%	41	1.0%	12	0.4%	25	0.8%	50	1.7%
NIR	16	1.4%	141	5.1%	195	4.6%	177	4.2%	146	4.5%	144	4.8%	144	4.8%
Total	559	48.2%	755	27.6%	1,168	27.4%	1,088	25.5%	777	24.1%	728	24.5%	680	22.5%
Black, Not Hispanic														
MSM	208	17.9%	352	12.9%	633	14.9%	630	14.8%	415	12.9%	389	13.1%	423	14.0%
IDU	200	17.2%	638	23.3%	858	20.2%	680	16.0%	488	15.1%	311	10.4%	212	7.0%
MSM/IDU	44	3.8%	177	6.5%	123	2.9%	90	2.1%	96	3.0%	55	1.8%	34	1.1%
Hetero-sex	53	4.6%	216	7.9%	494	11.6%	712	16.7%	571	17.7%	531	17.8%	566	18.7%
Presumed Hetero-sex	0	0.0%	5	0.2%	7	0.2%	231	5.4%	95	2.9%	166	5.6%	337	11.1%
NIR	50	4.3%	519	19.0%	837	19.7%	656	15.4%	621	19.3%	640	21.5%	570	18.9%
Total	575	49.6%	1,937	70.7%	3,002	70.5%	3,068	72.0%	2,341	72.6%	2,135	71.7%	2,193	72.5%
Am. Indian/Alaska Native														
MSM	4	0.3%	4	0.1%	11	0.3%	9	0.2%	5	0.2%	5	0.2%	6	0.2%
IDU	0	0.0%	5	0.2%	15	0.4%	8	0.2%	3	0.1%	9	0.3%	4	0.1%
MSM/IDU	0	0.0%	2	0.1%	2	0.0%	1	0.0%	0	0.0%	2	0.1%	1	0.0%
Hetero-sex	0	0.0%	1	0.0%	4	0.1%	7	0.2%	8	0.2%	3	0.1%	8	0.3%
Pre Het-sex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.0%	5	0.2%
NIR	0	0.0%	8	0.3%	5	0.1%	10	0.2%	6	0.2%	6	0.2%	5	0.2%
Total	7	0.6%	21	0.8%	40	0.9%	37	0.9%	23	0.7%	27	0.9%	29	1.0%
Hispanic														
MSM	8	0.7%	6	0.2%	15	0.4%	10	0.2%	10	0.3%	15	0.5%	24	0.8%
IDU	3	0.3%	2	0.1%	10	0.2%	9	0.2%	10	0.3%	2	0.1%	8	0.3%
MSM/IDU	0	0.0%	1	0.0%	1	0.0%	3	0.1%	0	0.0%	2	0.1%	0	0.0%
Hetero-sex	1	0.1%	3	0.1%	0	0.0%	13	0.3%	20	0.6%	13	0.4%	13	0.4%
Pre Het-sex	0	0.0%	0	0.0%	0	0.0%	1	0.0%	4	0.1%	6	0.2%	19	0.6%
NIR	3	0.3%	8	0.3%	13	0.3%	19	0.4%	29	0.9%	38	1.3%	42	1.4%
Total	16	1.4%	21	0.8%	39	0.9%	56	1.3%	74	2.3%	77	2.6%	107	3.5%

* The category Hemophilia, blood products, transplants, etc. is not displayed. Reports with unknown race/ethnicity excluded. NIR=non-specified risk MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men & who Inject Drugs IDU=Injection Drug Hetero-sex=Heterosexual contact Pre Het-sex=Presumed heterosexual contact

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Table 9A : N.C. Adult/Adolescent HIV Disease Reports by Year of Report (Mode of Transmission by Race/Ethnicity)*														
proportions represent the percent of cases with known transmission risk (NIRs have been excluded)														
	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, non-Hispanic														
MSM	404	37.1%	379	18.4%	626	19.5%	563	16.6%	341	14.1%	335	15.6%	300	13.3%
IDU	27	2.5%	91	4.4%	144	4.5%	122	3.6%	98	4.0%	69	3.2%	61	2.7%
MSM/IDU	42	3.9%	85	4.1%	62	1.9%	35	1.0%	42	1.7%	34	1.6%	22	1.0%
Blood products+	53	4.9%	26	1.3%	51	1.6%	28	0.8%	14	0.6%	15	0.7%	12	0.5%
All Heterosexual contact	17	1.6%	33	1.6%	90	2.8%	163	4.8%	136	5.6%	131	6.1%	141	6.2%
Total	543	49.8%	614	29.8%	973	30.4%	911	26.9%	631	26.1%	584	27.2%	536	23.7%
African American or Black, non-Hispanic														
	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	208	19.1%	352	17.1%	633	19.8%	630	18.6%	415	17.1%	389	18.1%	423	18.7%
IDU	200	18.3%	638	31.0%	858	26.8%	680	20.0%	488	20.1%	311	14.5%	212	9.4%
MSM/IDU	44	4.0%	177	8.6%	123	3.8%	90	2.7%	96	4.0%	55	2.6%	34	1.5%
Blood products+	20	1.8%	30	1.5%	50	1.6%	69	2.0%	55	2.3%	43	2.0%	51	2.3%
All Heterosexual contact	53	4.9%	221	10.7%	501	15.6%	943	27.8%	666	27.5%	697	32.5%	903	40.0%
Total	525	48.2%	1,418	68.8%	2,165	67.6%	2,412	71.1%	1,720	71.0%	1,495	69.6%	1,623	71.9%
All other racial/ethnic groups														
	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	13	1.2%	11	0.5%	29	0.9%	21	0.6%	18	0.7%	24	1.1%	36	1.6%
IDU	3	0.3%	7	0.3%	26	0.8%	18	0.5%	15	0.6%	11	0.5%	13	0.6%
MSM/IDU	0	0.0%	3	0.1%	3	0.1%	5	0.1%	1	0.0%	4	0.2%	1	0.0%
Blood products+	5	0.5%	3	0.1%	3	0.1%	3	0.1%	2	0.1%	2	0.1%	2	0.1%
All Heterosexual contact	1	0.1%	4	0.2%	6	0.2%	22	0.6%	35	1.4%	27	1.3%	46	2.0%
Total	22	2.0%	28	1.4%	67	2.1%	69	2.0%	71	2.9%	68	3.2%	98	4.3%

* Reports with unknown race/ethnicity are excluded. Does not include NIR reports MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men & who Inject Drugs
 IDU=Injection Drug All heterosexual contact includes the presumed heterosexual contact category Blood products+ = Hemophilia, blood products, transplants, etc

Table 10 : N.C. Adult/Adolescent Female HIV Disease Reports by Year of Report (Mode of Transmission by Race/Ethnicity)*														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, Not Hispanic														
IDU	4	3.3%	42	6.7%	51	4.8%	42	3.5%	33	3.2%	28	2.9%	29	3.0%
Hetero-sex	12	9.8%	17	2.7%	53	5.0%	72	6.1%	72	7.0%	73	7.4%	63	6.4%
Pre Het-sex	0	0.0%	0	0.0%	1	0.1%	21	1.8%	7	0.7%	10	1.0%	21	2.1%
NIR	2	1.6%	38	6.1%	62	5.8%	42	3.5%	43	4.2%	39	4.0%	48	4.9%
Total	22	17.9%	104	16.6%	172	16.1%	186	15.6%	161	15.6%	154	15.7%	166	16.9%
Black, Not Hispanic														
IDU	53	43.1%	188	30.1%	235	22.0%	180	15.1%	151	14.7%	94	9.6%	69	7.0%
Hetero-sex	31	25.2%	143	22.9%	295	27.6%	436	36.7%	356	34.6%	319	32.5%	301	30.7%
Pre Het-sex	0	0.0%	1	0.2%	3	0.3%	116	9.8%	52	5.0%	72	7.3%	166	16.9%
NIR	10	8.1%	165	26.4%	330	30.9%	216	18.2%	255	24.8%	295	30.1%	216	22.0%
Total	100	81.3%	512	81.9%	885	82.9%	981	82.5%	842	81.7%	803	81.9%	782	79.6%
Am. Indian/Alaska Native														
IDU	0	0.0%	1	0.2%	5	0.5%	0	0.0%	2	0.2%	2	0.2%	0	0.0%
Hetero-sex	0	0.0%	1	0.2%	3	0.3%	5	0.4%	6	0.6%	3	0.3%	5	0.5%
Pre Het-sex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.1%	1	0.1%
NIR	0	0.0%	2	0.3%	2	0.2%	5	0.4%	3	0.3%	1	0.1%	3	0.3%
Total	0	0.0%	4	0.6%	10	0.9%	11	0.9%	12	1.2%	8	0.8%	9	0.9%
Hispanic														
IDU	0	0.0%	0	0.0%	0	0.0%	2	0.2%	1	0.1%	1	0.1%	3	0.3%
Hetero-sex	1	0.8%	2	0.3%	0	0.0%	3	0.3%	8	0.8%	6	0.6%	6	0.6%
Pre Het-sex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.1%
NIR	0	0.0%	2	0.3%	0	0.0%	3	0.3%	3	0.3%	5	0.5%	9	0.9%
Total	1	0.8%	4	0.6%	0	0.0%	8	0.7%	12	1.2%	13	1.3%	20	2.0%
All Race/ethnicity														
IDU	57	46.3%	231	37.0%	291	27.2%	224	18.8%	188	18.3%	125	12.7%	101	10.3%
Hetero-sex	44	35.8%	163	26.1%	352	33.0%	517	43.5%	443	43.0%	403	41.1%	375	38.2%
Pre Het-sex	0	0.0%	1	0.2%	4	0.4%	137	11.5%	59	5.7%	83	8.5%	189	19.2%
NIR	12	9.8%	208	33.3%	394	36.9%	268	22.5%	305	29.6%	341	34.8%	280	28.5%
Total	123	100.0%	625	100.0%	1,068	100.0%	1,189	100.0%	1,030	100.0%	981	100.0%	982	100.0%

*The category Hemophilia, blood products, transplants, etc. is not displayed. Reports for Asian and Pacific Islanders are not displayed. IDU=Injection Drug
 Hetero-sex=Heterosexual contact Pre Het-sex=Presumed heterosexual contact NIR=non-specified risk

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Table 10A : N.C. Adult/Adolescent Female HIV Disease Reports by Year of Report (Mode of Transmission by Race/Ethnicity)*														
proportions represent the percent of cases with known transmission risk (NIRs have been excluded)														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, non-Hispanic														
IDU	4	3.6%	42	10.1%	51	7.6%	42	4.6%	33	4.6%	28	4.4%	29	4.1%
Blood products+	4	3.6%	7	1.7%	5	0.7%	9	1.0%	6	0.8%	4	0.6%	5	0.7%
All Heterosexual contact	12	10.8%	17	4.1%	54	8.0%	93	10.1%	79	10.9%	83	13.0%	84	12.0%
Total	20	18.0%	66	15.8%	110	16.3%	144	15.6%	118	16.3%	115	18.0%	118	16.8%
African American or Black, non-Hispanic														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
IDU	53	47.7%	188	45.1%	235	34.9%	180	19.5%	151	20.8%	94	14.7%	69	9.8%
Blood products+	6	5.4%	15	3.6%	22	3.3%	33	3.6%	28	3.9%	23	3.6%	30	4.3%
All Heterosexual contact	31	27.9%	144	34.5%	298	44.2%	552	59.9%	408	56.3%	391	61.1%	467	66.5%
Total	90	81.1%	347	83.2%	555	82.3%	765	83.1%	587	81.0%	508	79.4%	566	80.6%
All other racial/ethnic groups														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
IDU	0	0.0%	1	0.2%	5	0.7%	2	0.2%	4	0.6%	3	0.5%	3	0.4%
Blood products+	0	0.0%	0	0.0%	0	0.0%	1	0.1%	1	0.1%	2	0.3%	2	0.3%
All Heterosexual contact	1	0.9%	3	0.7%	4	0.6%	9	1.0%	15	2.1%	12	1.9%	13	1.9%
Total	1	0.9%	4	1.0%	9	1.3%	12	1.3%	20	2.8%	17	2.7%	18	2.6%
All racial/ethnic groups														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
IDU	57	51.4%	231	55.4%	291	43.2%	224	24.3%	188	25.9%	125	19.5%	101	14.4%
Blood products+	10	9.0%	22	5.3%	27	4.0%	43	4.7%	35	4.8%	29	4.5%	37	5.3%
All Heterosexual contact	44	39.6%	164	39.3%	356	52.8%	654	71.0%	502	69.2%	486	75.9%	564	80.3%
Total	111	100%	417	100%	674	100%	921	100%	725	100%	640	100%	702	100%

* Reports with unknown race/ethnicity are excluded. Does not include NIR reports IDU=Injection Drug Blood products+ = Hemophilia, blood products, transplants, etc
All heterosexual contact includes the presumed heterosexual contact category

Table 11 : N.C. Adult/Adolescent Male HIV Disease Reports by Year of Report (Mode of Transmission by Race/Ethnicity)*

White non-Hispanic														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	404	39.0%	379	17.9%	626	19.6%	563	18.3%	341	15.5%	335	16.8%	300	14.7%
IDU	23	2.2%	49	2.3%	93	2.9%	80	2.6%	65	3.0%	41	2.1%	32	1.6%
MSM/IDU	42	4.1%	85	4.0%	62	1.9%	35	1.1%	42	1.9%	34	1.7%	22	1.1%
Heterosex	5	0.5%	16	0.8%	36	1.1%	50	1.6%	52	2.4%	33	1.7%	28	1.4%
Presumed Heterosex	0	0.0%	0	0.0%	0	0.0%	20	0.7%	5	0.2%	15	0.8%	29	1.4%
NIR	14	1.4%	103	4.9%	133	4.2%	135	4.4%	103	4.7%	105	5.3%	96	4.7%
Total	537	51.8%	651	30.8%	996	31.2%	902	29.4%	616	28.1%	574	28.8%	514	25.2%
African American or Black Non-Hispanic														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	208	20.1%	352	16.7%	633	19.8%	630	20.5%	415	18.9%	389	19.5%	423	20.7%
IDU	147	14.2%	450	21.3%	623	19.5%	500	16.3%	337	15.4%	217	10.9%	143	7.0%
MSM/IDU	44	4.2%	177	8.4%	123	3.9%	90	2.9%	96	4.4%	55	2.8%	34	1.7%
Heterosex	22	2.1%	73	3.5%	199	6.2%	276	9.0%	215	9.8%	212	10.6%	265	13.0%
Presumed Heterosex	0	0.0%	4	0.2%	4	0.1%	115	3.7%	43	2.0%	94	4.7%	171	8.4%
NIR	40	3.9%	354	16.8%	507	15.9%	440	14.3%	366	16.7%	345	17.3%	354	17.3%
Total	475	45.8%	1,425	67.4%	2,117	66.4%	2,087	68.0%	1,499	68.3%	1,332	66.7%	1,411	69.1%
Am. Indian/Alaska Native														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	4	0.4%	4	0.2%	11	0.3%	9	0.3%	5	0.2%	5	0.3%	6	0.3%
IDU	0	0.0%	4	0.2%	10	0.3%	8	0.3%	1	0.0%	7	0.4%	4	0.2%
MSM/IDU	0	0.0%	2	0.1%	2	0.1%	1	0.0%	0	0.0%	2	0.1%	1	0.0%
Heterosex	0	0.0%	0	0.0%	1	0.0%	2	0.1%	2	0.1%	0	0.0%	3	0.1%
Presumed Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	4	0.2%
NIR	0	0.0%	6	0.3%	3	0.1%	5	0.2%	3	0.1%	5	0.3%	2	0.1%
Total	7	0.7%	17	0.8%	30	0.9%	26	0.8%	11	0.5%	19	1.0%	20	1.0%

* The category Hemophilia, blood products, transplants, etc. is not displayed. Reports for Asian and Pacific Islanders are not displayed. NIR=non-specified risk MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men & who Inject Drugs IDU=Injection Drug Hetero-sex=Heterosexual contact Pre Het-sex=Presumed heterosexual contact

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Table 11 continued : N.C. Adult/Adolescent Male HIV Disease Reports by Year of Report (Mode of Transmission by Race/Ethnicity)*														
Hispanic														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	8	0.8%	6	0.3%	15	0.5%	10	0.3%	10	0.5%	15	0.8%	24	1.2%
IDU	3	0.3%	2	0.1%	10	0.3%	7	0.2%	9	0.4%	1	0.1%	5	0.2%
MSM/IDU	0	0.0%	1	0.0%	1	0.0%	3	0.1%	0	0.0%	2	0.1%	0	0.0%
Heterosex	0	0.0%	1	0.0%	0	0.0%	10	0.3%	12	0.5%	7	0.4%	7	0.3%
Presumed Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.0%	4	0.2%	6	0.3%	18	0.9%
NIR	3	0.3%	6	0.3%	13	0.4%	16	0.5%	26	1.2%	33	1.7%	33	1.6%
Total	15	1.4%	17	0.8%	39	1.2%	48	1.6%	62	2.8%	64	3.2%	87	4.3%
Total (all Racial/ethnic categories-includes Asian/ Pacific Islander)														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
MSM	625	60.3%	742	35.1%	1,288	40.4%	1,214	39.5%	774	35.3%	748	37.5%	759	37.2%
IDU	173	16.7%	505	23.9%	737	23.1%	596	19.4%	413	18.8%	266	13.3%	185	9.1%
MSM/IDU	86	8.3%	265	12.5%	188	5.9%	130	4.2%	139	6.3%	93	4.7%	57	2.8%
Heterosex	27	2.6%	90	4.3%	237	7.4%	338	11.0%	282	12.8%	254	12.7%	303	14.8%
Presumed Heterosex	0	0.0%	4	0.2%	4	0.1%	136	4.4%	53	2.4%	115	5.8%	223	10.9%
NIR	58	5.6%	470	22.2%	658	20.6%	600	19.5%	498	22.7%	489	24.5%	486	23.8%
Total	1,037	100.0%	2,113	100.0%	3,189	100.0%	3,071	100.0%	2,195	100.0%	1,996	100.0%	2,041	100.0%

* The category Hemophilia, blood products, transplants, etc. is not displayed. Reports for Asian and Pacific Islanders are not displayed. NIR=non-specified risk MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men & who Inject Drugs IDU=Injection Drug Hetero-sex=Heterosexual contact Pre Het-sex=Presumed heterosexual contact

Table 11A : N.C. Adult/Adolescent Male HIV Disease Reports by Year of Report: (Mode of Transmission by Race/Ethnicity)*														
proportions represent the percent of cases with known transmission risk (NIRs have been excluded)														
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, non-Hispanic														
MSM	404	41.3%	379	23.1%	626	24.7%	563	22.8%	341	20.1%	335	22.2%	300	19.3%
IDU	23	2.3%	49	3.0%	93	3.7%	80	3.2%	65	3.8%	41	2.7%	32	2.1%
MSM/IDU	42	4.3%	85	5.2%	62	2.4%	35	1.4%	42	2.5%	34	2.3%	22	1.4%
Blood products+	49	5.0%	19	1.2%	46	1.8%	19	0.8%	8	0.5%	11	0.7%	7	0.5%
All Heterosexual contact	5	0.5%	16	1.0%	36	1.4%	70	2.8%	57	3.4%	48	3.2%	57	3.7%
Total	523	53.4%	548	33.4%	863	34.1%	767	31.0%	513	30.2%	469	31.1%	418	26.9%
African American or Black, non-Hispanic														
MSM	208	21.2%	352	21.4%	633	25.0%	630	25.5%	415	24.5%	389	25.8%	423	27.2%
IDU	147	15.0%	450	27.4%	623	24.6%	500	20.2%	337	19.9%	217	14.4%	143	9.2%
MSM/IDU	44	4.5%	177	10.8%	123	4.9%	90	3.6%	96	5.7%	55	3.6%	34	2.2%
Blood products+	14	1.4%	15	0.9%	28	1.1%	36	1.5%	27	1.6%	20	1.3%	21	1.4%
All Heterosexual contact	22	2.2%	77	4.7%	203	8.0%	391	15.8%	258	15.2%	306	20.3%	436	28.0%
Total	435	44.4%	1,071	65.2%	1,610	63.6%	1,647	66.7%	1,133	66.8%	987	65.5%	1,057	68.0%
All other racial/ethnic groups														
MSM	13	1.3%	11	0.7%	29	1.1%	21	0.8%	18	1.1%	24	1.6%	36	2.3%
IDU	3	0.3%	6	0.4%	21	0.8%	16	0.6%	11	0.6%	8	0.5%	10	0.6%
MSM/IDU	0	0.0%	3	0.2%	3	0.1%	5	0.2%	1	0.1%	4	0.3%	1	0.1%
Blood products+	5	0.5%	3	0.2%	3	0.1%	2	0.1%	1	0.1%	0	0.0%	0	0.0%
All Heterosexual contact	0	0.0%	1	0.1%	2	0.1%	13	0.5%	20	1.2%	15	1.0%	33	2.1%
Total	21	2.1%	24	1.5%	58	2.3%	57	2.3%	51	3.0%	51	3.4%	80	5.1%
All racial/ethnic groups														
MSM	625	63.8%	742	45.2%	1,288	50.9%	1,214	49.1%	774	45.6%	748	49.6%	759	48.8%
IDU	173	17.7%	505	30.7%	737	29.1%	596	24.1%	413	24.3%	266	17.7%	185	11.9%
MSM/IDU	86	8.8%	265	16.1%	188	7.4%	130	5.3%	139	8.2%	93	6.2%	57	3.7%
Blood products+	68	6.9%	37	2.3%	77	3.0%	57	2.3%	36	2.1%	31	2.1%	28	1.8%
All Heterosexual contact	27	2.8%	94	5.7%	241	9.5%	474	19.2%	335	19.7%	369	24.5%	526	33.8%
Total	979	100%	1,643	100%	2,531	100%	2,471	100%	1,697	100%	1,507	100%	1,555	100%

* Reports with unknown race/ethnicity are excluded. Does not include NIR reports MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men & who Inject Drugs IDU=Injection Drug All heterosexual contact includes the presumed heterosexual contact category Blood products+ = Hemophilia, blood products, transplants, etc

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Table 12 : N.C. HIV Disease Reports by Year of Report (Type of Resident County)												
Type of Area	Year Of Report											
	1991		1992		1993		1994		1995		1996	
	Reports	Percent	Reports	Percent	Reports	Percent	Reports	Percent	Reports	Percent	Reports	Percent
Metro Counties	1165	79.8%	1597	77.6%	1721	75.3%	1505	72.8%	1713	76.5%	1174	71.5%
Non Metro Counties	294	20.2%	462	22.4%	565	24.7%	562	27.2%	526	23.5%	467	28.5%
Total	1459	100.0%	2059	100.0%	2286	100.0%	2067	100.0%	2239	100.0%	1641	100.0%

Table 12 continued : N.C. HIV Disease Reports by Year of Report (Type of resident county)											
Type of Area	Year Of Report										
	1997		1998		1999		2000		2001		
	Reports	Percent	Reports	Percent	Reports	Percent	Reports	Percent	Reports	Percent	
Metro Counties	1182	71.5%	1082	73.4%	1179	76.3%	1125	76.8%	1194	74.5%	
Non Metro Counties	472	28.5%	393	26.6%	366	23.7%	339	23.2%	409	25.5%	
Total	1654	100.0%	1475	100.0%	1545	100.0%	1464	100.0%	1603	100.0%	

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Table 13 : North Carolina HIV Counseling and Testing Data (NTS/TTS Ratios)										
NTS/TTS Ratios	Ratio of NTS/TTS Pct. Testing					RATIO OF NTS/TTS POSITIVITY				
DEMOGRAPHIC										
	YEAR OF TEST					YEAR OF TEST				
	1997	1998	1999	2000	2001	1997	1998	1999	2000	2001
GENDER										
Male	1.65	1.63	1.74	1.91	2.05	1.55	1.41	1.43	1.07	1.19
Female	0.71	0.72	0.67	0.58	0.51	3.77	2.18	2.50	3.10	3.45
Missing	1.00	1.25	1.43	1.63	1.08	0.00		0.00	0.00	2.38
TOTAL						2.60	2.02	2.14	1.92	2.18
RACE/ETHNICITY										
White	0.79	0.99	0.96	0.90	0.84	3.70	1.81	2.99	2.30	2.52
Black	1.09	0.93	0.96	1.13	1.16	2.19	2.10	1.97	1.67	1.87
Hispanic	1.96	1.53	1.38	0.85	1.01	2.61	3.03	2.83	3.24	2.86
Asian/PI	1.57	0.86	0.71	0.71	0.71	0.00	0.00	0.00		0.00
Amer. Indian	0.55	0.40	0.27	0.70	0.58	0.00	0.00	0.00	0.00	5.30
Other/Missing	0.89	1.33	1.75	1.73	0.94	20.25	0.00	0.00	0.00	1.07
TOTAL						2.60	2.02	2.14	1.92	2.18
MODE OF TRANSMISSION										
MSM IDU	4.00	2.50	7.00	4.00	7.00	0.80	1.99	0.00	0.58	0.56
MSM	3.93	4.46	5.81	4.43	3.69	0.81	0.69	0.57	0.42	0.38
IDU	3.03	2.84	2.00	2.96	4.16	1.01	0.93	1.30	0.74	1.11
Sex Partner at Risk	0.53	0.52	0.60	0.89	0.71	4.22	2.56	1.68	2.62	1.55
STD Dx	0.90	0.81	0.72	0.80	0.81	2.07	1.64	4.00	2.75	4.14
Sex for Drugs/Money	6.75	5.60	4.00	4.80	6.83	1.12	0.81	2.62	0.45	0.76
Sex Using Non-inj. Drugs	1.78	2.21	1.75	1.71	2.53	2.36	0.00	2.24	1.86	3.75
Heterosexual	0.88	0.75	0.70	0.65	0.65	1.76	3.30	1.65	2.23	4.08
All Other	0.64	0.95	1.32	0.80	0.71	2.72	3.68	0.96	0.39	1.24
TOTAL						2.60	2.02	2.14	1.92	2.18

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Table 14 : North Carolina HIV Counseling and Testing Data (Percent Positivity by Venue)										
	VENUE									
	NONTRADITIONAL					TRADITIONAL				
	YEAR OF TEST					YEAR OF TEST				
DEMOGRAPHIC	1997	1998	1999	2000	2001	1997	1998	1999	2000	2001
GENDER										
Male	2.5	1.8	1.9	1.4	1.6	1.6	1.3	1.3	1.3	1.4
Female	1.5	0.8	0.9	1.1	1.3	0.4	0.4	0.4	0.4	0.4
Missing	0.0	0.0	0.0	0.0	1.2	0.3	0.0	1.1	1.1	0.5
TOTAL	2.0	1.3	1.4	1.3	1.5	0.8	0.7	0.7	0.7	0.7
RACE										
White	1.2	0.5	0.8	0.7	0.7	0.3	0.3	0.3	0.3	0.3
Black	3.0	2.4	2.2	1.9	2.2	1.4	1.1	1.1	1.1	1.2
Hispanic	1.0	1.2	1.3	1.0	1.0	0.4	0.4	0.4	0.3	0.4
Asian/PI	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.4
AI/Alas	0.0	0.0	0.0	0.0	2.1	0.6	0.4	0.6	0.7	0.4
Other/Missing	4.2	0.0	0.0	0.0	0.9	0.2	0.4	0.7	0.9	0.9
TOTAL	2.0	1.3	1.4	1.3	1.5	0.8	0.7	0.7	0.7	0.7
MODE OF TRANSMISSION										
MSM IDU	7.7	5.0	0.0	2.6	4.4	9.6	2.5	7.6	4.4	7.9
MSM	5.2	3.3	3.8	2.6	2.5	6.4	4.7	6.6	6.1	6.4
IDU	3.3	1.9	3.3	1.8	2.2	3.3	2.0	2.5	2.4	2.0
Sex Partner at Risk	3.3	2.0	1.2	2.0	1.5	0.8	0.8	0.7	0.7	1.0
STD Dx	1.3	1.1	2.6	1.5	1.8	0.6	0.6	0.6	0.5	0.4
Sex for Drugs/Money	2.4	1.0	1.7	0.8	1.1	2.2	1.2	0.6	1.9	1.4
Sex Using Non-inj. Drugs	0.9	0.0	0.6	0.7	1.2	0.4	0.4	0.3	0.4	0.3
Heterosexual	0.5	1.1	0.5	0.7	1.3	0.3	0.3	0.3	0.3	0.3
All Other	0.7	0.9	0.3	0.2	0.4	0.3	0.2	0.4	0.4	0.3
TOTAL	2.0	1.3	1.4	1.3	1.5	0.8	0.7	0.7	0.7	0.7

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Table 15 : North Carolina HIV Counseling and Testing Data (HIV Tests by Venue)										
	VENUE									
	NONTRADITIONAL					TRADITIONAL				
	YEAR OF TEST					YEAR OF TEST				
DEMOGRAPHIC	1997	1998	1999	2000	2001	1997	1998	1999	2000	2001
GENDER										
Male	1547	1867	1615	2916	4354	32478	31971	30535	31372	32152
Female	1504	1838	1402	1928	2329	73179	71922	69009	68776	68905
Missing	13	18	30	64	86	384	393	718	791	1229
TOTAL	3064	3723	3047	4908	6769	106041	104286	100262	100939	102286
RACE										
White	1158	1695	1268	1821	2236	50826	48022	43640	41578	40136
Black	1421	1521	1293	2421	3391	45118	45821	44148	44010	44187
Hispanic	408	422	395	517	955	7194	7672	9379	12410	14225
Asian/PI	35	24	16	26	31	743	707	743	723	728
AI/Alas	18	16	10	32	48	1188	1093	1085	1022	1273
Other/Missing	24	45	65	91	108	972	971	1267	1196	1737
TOTAL	3064	3723	3047	4908	6769	106041	104286	100262	100939	102286
MODE OF TRANSMISSION										
MSM IDU	26	20	21	39	45	167	159	145	158	126
MSM	326	397	372	503	648	2844	2493	2123	2295	2634
IDU	269	264	153	392	537	3043	2655	2471	2730	1989
Sex Partner at Risk	453	510	417	918	1015	29406	27551	22938	21266	21694
STD Dx	473	570	428	739	1069	18270	19628	19472	19000	20029
Sex for Drugs/Money	82	103	60	119	280	415	499	471	540	570
Sex Using Non-inj. Drugs	425	592	355	545	992	8258	7493	6750	6582	5885
Heterosexual	737	818	663	1028	1441	29157	30599	31420	32414	33708
All Other	273	449	578	625	742	14481	13209	14472	15954	15651
TOTAL	3064	3723	3047	4908	6769	106041	104286	100262	100939	102286

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Table 16: North Carolina HIV Counseling and Testing Data (HIV Positives by Venue)										
	VENUE									
	NONTRADITIONAL					TRADITIONAL				
	YEAR OF TEST					YEAR OF TEST				
DEMOGRAPHIC	1997	1998	1999	2000	2001	1997	1998	1999	2000	2001
GENDER										
Male	38	34	30	41	70	515	412	396	414	436
Female	23	15	13	22	30	297	269	256	253	257
Missing	0	0	0	0	1	1	0	8	9	6
TOTAL	61	49	43	63	101	813	681	660	676	699
RACE/ETHNICITY										
White	14	8	10	12	15	166	125	115	119	107
Black	42	36	28	46	74	610	517	486	502	517
Hispanic	4	5	5	5	10	27	30	42	37	52
Asian/PI	0	0	0	0	0	1	1	1	0	3
Al/Alas	0	0	0	0	1	7	4	7	7	5
Other/Missing	1	0	0	0	1	2	4	9	11	15
TOTAL	61	49	43	63	101	813	681	660	676	699
MODE OF TRANSMISSION										
MSM IDU	2	1	0	1	2	16	4	11	7	10
MSM	17	13	14	13	16	182	118	140	141	169
IDU	9	5	5	7	12	101	54	62	66	40
Sex Partner at Risk	15	10	5	18	15	231	211	164	159	207
STD Dx	6	6	11	11	19	112	126	125	103	86
Sex for Drugs/Money	2	1	1	1	3	9	6	3	10	8
Sex Using Non-inj. Drugs	4	0	2	4	12	33	28	17	26	19
Heterosexual	4	9	3	7	19	90	102	86	99	109
All Other	2	4	2	1	3	39	32	52	65	51
TOTAL	61	49	43	63	101	813	681	660	676	699

Table 17 : N.C. Adult/Adolescent HIV Disease (13-24 Years old) Reports by Year of Report (Mode of Transmission by Race/Ethnicity)* proportions represent the percent of cases with known transmission risk (NIRs have been excluded)											
Mode of Transmission	Race/Ethnicity	92-93		94-95		96-97		98-99		00-01	
		Rpts	Percent								
Male											
MSM	White non-Hispanic	43	23.9%	48	24.7%	26	19.3%	25	17.1%	22	12.2%
	African Am non-Hispanic	76	42.2%	75	38.7%	58	43.0%	70	47.9%	109	60.6%
	Other	4	2.2%	1	0.5%	2	1.5%	8	5.5%	4	2.2%
	Total	123	68.3%	124	63.9%	86	63.7%	103	70.5%	135	75.0%
IDU	White non-Hispanic	1	0.6%	4	2.1%	2	1.5%	0	0.0%	0	0.0%
	African Am non-Hispanic	13	7.2%	11	5.7%	6	4.4%	1	0.7%	1	0.6%
	Other	1	0.6%	2	1.0%	0	0.0%	0	0.0%	1	0.6%
	Total	15	8.3%	17	8.8%	8	5.9%	1	0.7%	2	1.1%
MSM/IDU	White non-Hispanic	1	0.6%	2	1.0%	2	1.5%	6	4.1%	1	0.6%
	African Am non-Hispanic	11	6.1%	8	4.1%	5	3.7%	3	2.1%	1	0.6%
	Other	0	0.0%	1	0.5%	0	0.0%	1	0.7%	0	0.0%
	Total	12	6.7%	11	5.7%	7	5.2%	10	6.8%	2	1.1%
Heterosexual	White non-Hispanic	1	0.6%	7	3.6%	5	3.7%	0	0.0%	7	3.9%
	African Am non-Hispanic	10	5.6%	29	14.9%	21	15.6%	25	17.1%	28	15.6%
	Other	0	0.0%	1	0.5%	5	3.7%	4	2.7%	5	2.8%
	Total	11	6.1%	37	19.1%	31	23.0%	29	19.9%	40	22.2%
Female											
IDU	White non-Hispanic	9	9.4%	8	4.3%	2	1.3%	4	3.8%	4	3.9%
	African Am non-Hispanic	19	19.8%	12	6.5%	15	9.8%	4	3.8%	0	0.0%
	Other	1	1.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
	Total	29	30.2%	20	10.8%	17	11.1%	8	7.6%	4	3.9%
Heterosexual	White non-Hispanic	13	13.5%	23	12.4%	23	15.0%	16	15.2%	13	12.6%
	African Am non-Hispanic	50	52.1%	132	71.4%	100	65.4%	75	71.4%	81	78.6%
	Other	1	1.0%	5	2.7%	6	3.9%	4	3.8%	3	2.9%
	Total	64	66.7%	160	86.5%	129	84.3%	95	90.5%	97	94.2%

* The category Hemophilia, blood products, transplants, etc. is not displayed. Reports with unknown race/ethnicity are excluded. Does not include NIR reports
 MSM= Men who Sex with Men MSM/IDU=Men who have Sex with Men & who Inject Drugs IDU=Injection Drug Use
 Heterosexual contact includes the presumed heterosexual contact category

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Table 18 : N.C. Pediatric (0-12 Years old) Reports by Year of Report (Mode of Transmission by Race/Ethnicity)																
Mode of Transmission	83-89		90-91		92-93		94-95		96-97		98-99		00-01		Total	
	N	Pct	N	Pct												
White, non-Hispanic																
Hemophilia	2	9.1%	2	11.1%	5	6.4%	0	0.0%	2	4.0%	1	4.2%	0	0.0%	12	4.9%
Mother with/ at risk For HIV infection	2	9.1%	2	11.1%	9	11.5%	5	11.6%	5	10.0%	5	20.8%	0	0.0%	28	11.4%
Transfusion/ Transplant	3	13.6%	0	0.0%	0	0.0%	1	2.3%	0	0.0%	0	0.0%	0	0.0%	4	1.6%
Other	0	0.0%	0	0.0%	2	2.6%	1	2.3%	0	0.0%	1	4.2%	0	0.0%	4	1.6%
Black, Non-Hispanic																
Hemophilia	0	0.0%	0	0.0%	0	0.0%	2	4.7%	0	0.0%	1	4.2%	0	0.0%	3	1.2%
Mother with/ at risk For HIV infection	10	45.5%	13	72.2%	57	73.1%	27	62.8%	35	70.0%	12	50.0%	5	45.5%	159	64.6%
Transfusion/ Transplant	3	13.6%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	4.2%	0	0.0%	4	1.6%
Other	1	4.5%	1	5.6%	2	2.6%	5	11.6%	5	10.0%	3	12.5%	3	27.3%	20	8.1%
Hispanic																
Mother with/ at risk For HIV infection	1	4.5%	0	0.0%	0	0.0%	2	4.7%	1	2.0%	0	0.0%	3	27.3%	7	2.8%
Other or unknown Race/Ethnicity																
Hemophilia	0	0.0%	0	0.0%	1	1.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.4%
Mother with/ at risk For HIV infection	0	0.0%	0	0.0%	2	2.6%	0	0.0%	2	4.0%	0	0.0%	0	0.0%	4	1.6%
Total	22	100%	18	100%	78	100%	43	100%	50	100%	24	100%	11	100%	246	100%

N = number of reports

18A : N.C. HIV Disease Reports that were likely perinatal transmissions Table									
Year of Birth									
1992	1993	1994	1995	1996	1997	1998	1999	2000	2001
23	18	11	13	10	3	5	1	1	1

Table 19 : North Carolina AIDS Reports By Aids Report Year (Reporting Trends AIDS Reports)										
Reporting Category	Year AIDS Report									
	83-89		90-91		92-93		94-95		1996	
	Rpts	Pct	Rpts	Pct	Rpts	Pct	Rpts	Pct	Rpts	Pct
AIDS ONLY	1173	99.9%	1071	99.2%	1819	94.0%	1472	69.1%	479	53.2%
HIV, then AIDS	1	0.1%	9	0.8%	117	6.0%	657	30.9%	421	46.8%
Total	1174	100%	1080	100%	1936	100%	2129	100%	900	100%

Table 19 continued : North Carolina AIDS Reports By Aids Report Year (Reporting Trends AIDS Reports)										
Reporting Category	Year AIDS Report									
	1997		1998		1999		2000		2001	
	Rpts	Pct	Rpts	Pct	Rpts	Pct	Rpts	Pct	Rpts	Pct
AIDS ONLY	471	56.5%	435	55.3%	474	61.8%	377	55.4%	461	52.9%
HIV, then AIDS	363	43.5%	352	44.7%	293	38.2%	303	44.6%	410	47.1%
Total	834	100%	787	100%	767	100%	680	100%	871	100%

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Table 20 : N.C. AIDS Reports by Year of AIDS Report (Race/Ethnicity by Gender)

Year of AIDS Report														
Male														
Race/Ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, non-Hispanic	543	46.3%	378	35.0%	644	33.3%	573	26.9%	363	20.9%	328	21.1%	270	17.4%
Black, non-Hispanic	473	40.3%	496	45.9%	933	48.2%	1090	51.2%	869	50.1%	776	49.9%	795	51.3%
Am.Indian/ Alaska N	7	0.6%	6	0.6%	8	0.4%	17	0.8%	8	0.5%	8	0.5%	12	0.8%
Asian, Pacific Is.	3	0.3%	1	0.1%	5	0.3%	3	0.1%	4	0.2%	1	0.1%	2	0.1%
Hispanic	15	1.3%	10	0.9%	29	1.5%	30	1.4%	50	2.9%	41	2.6%	48	3.1%
Unknown	3	0.3%	2	0.2%	4	0.2%	3	0.1%	1	0.1%	0	0.0%	1	0.1%
Total	1044	88.9%	893	82.7%	1623	83.8%	1716	80.6%	1295	74.7%	1154	74.3%	1128	72.7%
Female														
Race/Ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, non-Hispanic	21	1.8%	28	2.6%	45	2.3%	61	2.9%	59	3.4%	38	2.4%	73	4.7%
Black, non-Hispanic	107	9.1%	154	14.3%	263	13.6%	343	16.1%	373	21.5%	347	22.3%	332	21.4%
Am.Indian/ Alaska N	0	0.0%	1	0.1%	4	0.2%	3	0.1%	3	0.2%	4	0.3%	6	0.4%
Asian, Pacific Is.	0	0.0%	1	0.1%	1	0.1%	0	0.0%	0	0.0%	2	0.1%	1	0.1%
Hispanic	2	0.2%	3	0.3%	0	0.0%	6	0.3%	4	0.2%	9	0.6%	11	0.7%
Total	130	11.1%	187	17.3%	313	16.2%	413	19.4%	439	25.3%	400	25.7%	423	27.3%
Both Sexes														
Race/Ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	Rpts	Pct												
White, non-Hispanic	564	48.0%	406	37.6%	689	35.6%	634	29.8%	422	24.3%	366	23.6%	343	22.1%
Black, non-Hispanic	580	49.4%	650	60.2%	1196	61.8%	1433	67.3%	1242	71.6%	1123	72.3%	1127	72.7%
Am.Indian/ Alaska N	7	0.6%	7	0.6%	12	0.6%	20	0.9%	11	0.6%	12	0.8%	18	1.2%
Asian, Pacific Is.	3	0.3%	2	0.2%	6	0.3%	3	0.1%	4	0.2%	3	0.2%	3	0.2%
Hispanic	17	1.4%	13	1.2%	29	1.5%	36	1.7%	54	3.1%	50	3.2%	59	3.8%
Unknown	3	0.3%	2	0.2%	4	0.2%	3	0.1%	1	0.1%	0	0.0%	1	0.1%
Total	1174	100%	1080	100%	1936	100%	2129	100%	1734	100%	1554	100%	1551	100%

Table 21 : North Carolina AIDS Cases (Demographic Rates)

Category	Year of Report									
	1997		1998		1999		2000		2001	
	Cases	Rate [†]	Cases	Rate [†]	Cases	Rate [†]	Cases	Rate [‡]	Cases	Rate [‡]
Age Group										
00-12 years	6	0.4	1	0.1	3	0.2	3	0.2	0	0.0
13-19 years	4	0.6	6	0.8	8	1.1	4	0.5	6	0.8
20-29 years	130	12.3	112	10.6	111	10.7	91	7.7	120	10.2
30-39 years	382	32.0	333	27.8	319	26.5	282	22.3	340	26.8
40-49 years	228	20.8	254	22.7	230	20.0	216	18.0	301	25.0
50 and over	84	4.2	81	3.9	96	4.5	84	3.8	104	4.7
Total	834	11.2	787	10.4	767	10.0	680	8.4	871	10.8
Race/Ethnicity										
White*	199	3.6	199	3.6	167	3.0	153	2.7	190	3.4
African Am. or Black*	600	36.9	559	33.9	564	33.8	485	28.1	642	37.3
Am. Indian/Al. Native*	6	6.5	5	5.3	7	7.3	6	6.3	12	12.6
Asian/Pacific Islander*	0	0.0	2	2.1	1	1.0	2	1.7	1	0.9
Hispanic or Latino	29	19.7	22	13.6	28	15.9	34	9.0	25	6.6
Total	834	11.2	787	10.4	767	10.0	680	8.5	871	10.9
* Not Hispanic										
Sex										
Male	618	17.2	591	16.1	563	15.2	493	12.5	635	16.1
Female	216	5.6	196	5.0	204	5.2	187	4.6	236	5.7
Total	834	11.2	787	10.4	767	10.0	680	8.4	871	10.8

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Table 22 : N.C. HIV Disease Cases (County of Residence ,Year of First Report through 12/31/2001)						
County	83-89	90-94	95-99	2000	2001	Cumulative
Alamance	11	97	96	18	16	238
Alexander	1	11	6	1	0	19
Anson	1	41	38	2	6	88
Ashe	0	0	4	0	0	4
Avery	2	2	6	0	0	10
Beaufort	9	53	44	13	16	135
Bertie	3	21	40	6	12	82
Bladen	5	27	29	3	6	70
Brunswick	5	44	38	7	19	113
Buncombe	17	232	225	38	24	536
Burke	5	29	29	2	3	68
Cabarrus	12	80	70	10	5	177
Caldwell	3	34	19	1	3	60
Camden	0	3	6	3	1	13
Carteret	7	33	18	2	0	60
Caswell	0	9	8	3	1	21
Catawba	9	67	60	23	6	165
Chatham	5	26	22	3	6	62
Cherokee	1	5	6	0	2	14
Chowan	2	14	14	2	1	33
Clay	0	1	0	0	1	2
Cleveland	10	86	78	10	11	195
Columbus	10	63	70	9	17	169
Craven	14	120	71	18	22	245
Cumberland	63	475	388	64	61	1051
Currituck	1	8	4	1	0	14
Dare	5	12	14	2	0	33
Davidson	14	74	84	13	6	191
Davie	1	15	12	3	3	34
Duplin	9	57	65	6	11	148
Durham	77	668	484	86	109	1424
Edgecombe	9	108	101	16	14	248
Forsyth	72	358	512	92	80	1114
Franklin	6	34	33	3	12	88
Gaston	18	278	196	42	27	561
Gates	0	2	2	0	2	6
Graham	0	0	2	0	1	3
Granville	8	62	62	10	13	155
Greene	2	21	45	2	4	74
Guilford	73	588	777	127	133	1698
Halifax	12	92	93	9	13	219
Harnett	10	65	57	7	11	150
Haywood	5	20	22	2	1	50
Henderson	3	38	47	6	4	98
Hertford	8	29	26	11	7	81
Hoke	3	26	49	5	14	97
Hyde	0	1	4	0	0	5
Iredell	9	54	48	3	9	123
Jackson	1	5	10	1	0	17
Johnston	16	107	101	20	29	273

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Table 22 continued : N.C. HIV Disease Cases (County of Residence, Year of First Report through 12/31/2001)						
County	83-89	90-94	95-99	2000	2001	Cumulative
Jones	0	7	8	0	0	15
Lee	2	43	53	14	9	121
Lenoir	6	133	129	26	21	315
Lincoln	3	16	26	3	3	51
Macon	0	10	11	2	1	24
Madison	0	4	9	1	2	16
Martin	2	26	31	7	10	76
McDowell	4	8	16	1	1	30
Mecklenburg	179	1711	1321	218	258	3687
Mitchell	1	3	7	0	0	11
Montgomery	1	14	18	8	1	42
Moore	7	46	39	11	14	117
Nash	13	116	107	21	25	282
New Hanover	29	235	199	42	63	568
Northampton	6	31	26	4	7	74
Onslow	21	72	77	14	16	200
Orange	29	100	76	18	13	236
Pamlico	3	12	6	2	1	24
Pasquotank	4	27	32	9	1	73
Pender	5	34	24	0	5	68
Perquimans	1	5	17	2	3	28
Person	1	24	29	2	5	61
Pitt	24	233	230	25	37	549
Polk	1	7	13	2	1	24
Randolph	9	34	44	8	9	104
Richmond	2	58	57	7	3	127
Robeson	10	147	144	17	27	345
Rockingham	5	56	65	8	9	143
Rowan	13	116	84	12	15	240
Rutherford	3	30	29	9	7	78
Sampson	6	74	68	4	16	168
Scotland	4	51	59	9	0	123
Stanly	1	31	29	7	6	74
Stokes	1	6	7	2	4	20
Surry	3	13	21	1	8	46
Swain	3	9	6	1	1	20
Transylvania	2	14	10	5	2	33
Tyrrell	0	4	1	2	1	8
Union	9	58	58	7	14	146
Vance	5	74	79	5	17	180
Wake	154	852	707	154	156	2023
Warren	0	12	12	2	6	32
Washington	2	29	30	3	2	66
Watauga	3	4	3	1	0	11
Wayne	24	136	115	28	23	326
Wilkes	2	10	9	4	1	26
Wilson	21	152	137	27	36	373
Yadkin	3	3	13	2	0	21
Yancey	1	2	8	0	1	12
Missing	0	0	20	2	0	22
Total	1185	9187	8554	1464	1603	21993

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County	HIV only	AIDS only	HIV to AIDS	Total	County	HIV only	AIDS only	HIV to AIDS	Total
Alamance	114	34	19	167	Jones	8	1	2	11
Alexander	10	2	3	15	Lee	74	9	16	99
Anson	36	18	11	65	Lenoir	124	55	52	231
Ashe	1	2	1	4	Lincoln	28	7	2	37
Avery	3	4	1	8	Macon	9	6	1	16
Beaufort	46	28	6	80	Madison	7	5	1	13
Bertie	23	24	10	57	Martin	35	12	7	54
Bladen	31	6	4	41	McDowell	10	9	3	22
Brunswick	40	32	6	78	Mecklenburg	1930	404	262	2596
Buncombe	190	112	63	365	Mitchell	5	1	1	7
Burke	28	9	5	42	Montgomery	20	4	5	29
Cabarrus	73	33	13	119	Moore	59	14	8	81
Caldwell	26	7	3	36	Nash	113	70	22	205
Camden	4	5	2	11	New Hanover	254	84	65	403
Carteret	18	10	4	32	Northampton	21	18	7	46
Caswell	8	5	1	14	Onslow	80	44	18	142
Catawba	63	25	13	101	Orange	101	42	21	164
Chatham	32	10	2	44	Pamlico	8	2	2	12
Cherokee	5	2	1	8	Pasquotank	37	13	5	55
Chowan	14	8	1	23	Pender	21	15	9	45
Clay	1	1	0	2	Perquimans	15	4	4	23
Cleveland	104	11	16	131	Person	38	8	2	48
Columbus	78	22	19	119	Pitt	204	122	55	381
Craven	105	38	23	166	Polk	5	10	2	17
Cumberland	554	128	86	768	Randolph	50	9	9	68
Currituck	5	1	1	7	Richmond	66	8	12	86
Dare	10	9	3	22	Robeson	157	53	44	254
Davidson	82	20	16	118	Rockingham	68	24	11	103
Davie	12	10	4	26	Rowan	89	40	23	152
Duplin	50	40	9	99	Rutherford	30	22	3	55
Durham	642	210	98	950	Sampson	73	17	28	118
Edgecombe	106	45	22	173	Scotland	65	12	13	90
Forsyth	506	159	87	752	Stanly	42	10	6	58
Franklin	39	12	9	60	Stokes	7	6	3	16
Gaston	275	62	56	393	Surry	21	12	3	36
Gates	2	3	0	5	Swain	4	6	1	11
Graham	2	0	1	3	Transylvania	11	9	1	21
Granville	77	23	12	112	Tyrrell	3	1	1	5
Greene	24	15	20	59	Union	70	16	15	101
Guilford	729	260	139	1128	Vance	75	24	21	120
Halifax	89	40	20	149	Wake	843	354	200	1397
Harnett	65	26	16	107	Warren	15	3	6	24
Haywood	16	11	7	34	Washington	20	13	6	39
Henderson	26	31	12	69	Watauga	2	4	1	7
Hertford	24	22	13	59	Wayne	122	53	25	200
Hoke	46	24	7	77	Wilkes	7	7	2	16
Hyde	1	2	0	3	Wilson	169	55	34	258
Iredell	44	14	15	73	Yadkin	9	6	2	17
Jackson	5	7	2	14	Yancey	5	2	2	9
Johnston	139	36	24	199	Missing	21	0	1	22
					Total	9873	3383	1951	15207

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Table 24 : N.C. HIV Disease Cases (County Rank Order by Average Rate (3year) see note at bottom)								
Year	1999	2000	2001	1999	2000	2001	Avg rate*	Rank
County	Cases			Rates per 100,000 population			Avg rate*	Rank
Bertie	10	6	12	50.5	30.4	60.9	47.3	1
Durham	72	86	108	32.7	38.3	47.2	39.4	2
Lenoir	21	26	21	35.3	43.6	35.0	38.0	3
Wilson	21	27	36	28.7	36.5	48.2	37.8	4
Edgecombe	28	16	14	50.2	28.8	25.3	34.7	5
Mecklenburg	247	218	257	36.3	31.1	35.8	34.4	6
Hertford	4	11	7	17.7	48.7	30.9	32.4	7
Forsyth	122	92	80	40.3	30.0	25.7	32.0	8
Guilford	132	127	133	31.8	30.0	31.0	30.9	9
New Hanover	43	42	63	27.3	26.0	38.2	30.5	10
Martin	6	7	10	23.5	27.4	39.0	30.0	11
Nash	24	21	25	27.7	24.0	28.2	26.6	12
Hoke	8	5	14	24.3	14.7	40.0	26.3	13
Beaufort	6	13	16	13.4	28.9	35.3	25.9	14
Lee	15	14	9	30.9	28.4	18.0	25.8	15
Vance	10	5	17	23.5	11.6	39.1	24.7	16
Wake	156	154	157	25.5	24.3	24.0	24.6	17
Columbus	14	9	17	25.7	16.4	30.7	24.3	18
Tyrrell	0	2	1	0.0	48.5	23.9	24.1	19
Pitt	34	25	37	26.0	18.6	27.0	23.9	20
Perquimans	3	2	3	26.6	17.6	26.2	23.4	21
Granville	11	10	13	23.0	20.5	26.2	23.2	22
Craven	23	18	22	25.3	19.7	23.8	22.9	23
Wayne	27	28	22	23.9	24.7	19.2	22.6	24
Washington	4	3	2	29.1	21.9	14.6	21.9	25
Duplin	15	6	11	31.0	12.2	21.9	21.7	26
Halifax	15	9	13	26.2	15.7	22.6	21.5	27
Cumberland	62	64	61	20.6	21.1	19.9	20.5	28
Robeson	29	17	27	23.8	13.7	21.5	19.7	29
Camden	0	3	1	0.0	43.4	14.3	19.2	30
North Carolina	1545	1464	1600	19.5	18.1	19.5	19.0	
Gaston	39	42	27	20.6	22.0	14.1	18.9	31
Northampton	1	4	7	4.5	18.1	31.6	18.1	32
Franklin	9	3	12	19.4	6.3	24.7	16.8	33
Johnston	13	20	29	10.9	16.3	22.8	16.7	34
Buncombe	39	38	24	19.1	18.3	11.4	16.3	35
Anson	4	2	6	15.8	7.9	23.5	15.8	36
Cleveland	22	10	11	23.1	10.4	11.3	14.9	37
Warren	1	2	6	5.0	10.0	29.7	14.9	37
Sampson	7	4	16	11.8	6.6	25.9	14.8	39
Moore	8	11	14	10.9	14.6	18.3	14.6	40
Alamance	23	18	16	17.8	13.7	12.0	14.5	41
Brunswick	6	7	19	8.4	9.5	25.1	14.3	42
Greene	2	2	4	10.7	10.5	20.6	13.9	43
Scotland	6	9	0	16.7	25.0	0.0	13.9	43
Montgomery	2	8	1	7.5	29.7	3.7	13.6	45
Pasquotank	3	9	1	8.6	25.7	2.8	12.4	46
Bladen	3	3	6	9.4	9.3	18.3	12.3	47
Orange	11	18	13	9.5	15.1	10.7	11.8	48

Avg. rate is based on 3-year average of cases. Population source is the N.C. State Office of Planning (Demographics Unit). Note that rates based on small case numbers (usually 20) are considered unreliable measures and are presented here in italics.

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Table 24 cont. : N.C. HIV Disease Cases (County Rank Order by Average Rate (3year) see note								
Year	1999	2000	2001	1999	2000	2001	Avg rate*	Rank
County	Cases			Rates per 100,000 population			Avg rate*	Rank
Rockingham	15	8	9	16.4	8.7	9.7	11.6	49
Stanly	7	7	6	12.3	12.0	10.2	11.5	50
Chowan	2	2	1	13.8	13.7	6.8	11.5	50
Richmond	6	7	3	12.9	15.0	6.4	11.5	50
Rowan	14	12	15	10.9	9.2	11.3	10.5	53
Harnett	10	7	11	11.2	7.6	11.7	10.2	54
Person	3	2	5	8.5	5.6	13.8	9.3	55
Polk	2	2	1	11.1	10.9	5.3	9.1	56
Dare	6	2	0	20.4	6.6	0.0	9.0	57
Onslow	10	14	16	6.7	9.4	10.5	8.9	58
Chatham	4	3	6	8.2	6.0	11.9	8.7	59
Rutherford	0	9	7	0.0	14.3	11.0	8.4	60
Catawba	6	23	6	4.3	16.2	4.2	8.2	61
Pender	5	0	5	12.4	0.0	11.8	8.1	62
Avery	4	0	0	24.2	0.0	0.0	8.1	62
Transylvania	0	5	2	0.0	17.0	6.7	7.9	64
Swain	1	1	1	7.8	7.7	7.6	7.7	65
Pamlico	0	2	1	0.0	15.4	7.7	7.7	65
Davie	2	3	3	5.8	8.6	8.4	7.6	67
Union	7	7	14	5.8	5.6	10.9	7.4	68
Davidson	13	13	6	8.9	8.8	4.0	7.2	69
Randolph	8	8	9	6.2	6.1	6.8	6.4	70
Lincoln	6	3	3	9.6	4.7	4.6	6.3	71
Gates	0	0	2	0.0	0.0	18.8	6.3	71
Surry	4	1	8	5.7	1.4	11.1	6.0	73
Cabarrus	9	10	4	7.0	7.6	3.0	5.8	74
Caswell	0	3	1	0.0	12.7	4.2	5.6	75
Henderson	5	6	4	5.7	6.7	4.4	5.6	75
Cherokee	2	0	2	8.3	0.0	8.1	5.5	77
Iredell	7	3	9	5.8	2.4	7.1	5.1	78
Madison	0	1	2	0.0	5.1	10.0	5.0	79
Macon	1	2	1	3.4	6.7	3.3	4.5	80
Stokes	0	2	4	0.0	4.5	8.8	4.4	81
Graham	0	0	1	0.0	0.0	12.4	4.1	82
Burke	6	2	3	6.8	2.2	3.3	4.1	82
Yancey	1	0	1	5.7	0.0	5.6	3.7	84
Clay	0	0	1	0.0	0.0	11.2	3.7	84
Currituck	1	1	0	5.6	5.5	0.0	3.7	84
Yadkin	2	2	0	5.6	5.5	0.0	3.7	84
Jones	1	0	0	9.7	0.0	0.0	3.2	88
McDowell	2	1	1	4.8	2.4	2.3	3.2	88
Haywood	2	2	1	3.7	3.7	1.8	3.1	90
Wilkes	1	4	1	1.5	6.1	1.5	3.0	91
Alexander	2	1	0	6.0	3.0	0.0	3.0	91
Caldwell	2	1	3	2.6	1.3	3.8	2.6	93
Carteret	1	2	0	1.7	3.4	0.0	1.7	94
Watauga	1	1	0	2.4	2.3	0.0	1.6	95
Ashe	1	0	0	4.1	0.0	0.0	1.4	96
Jackson	0	1	0	0.0	3.0	0.0	1.0	97

Avg. rate is based on 3 year average of cases. Population source is the N.C. State Office of Planning (Demographics Unit). Note that rates based on small case numbers (usually 20) are considered unreliable measures and are presented here in italics

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Table 25 : N.C. AIDS Cases (County of AIDS Residence by Year of AIDS Report through 12/31/2001)						
AIDS County	83-89	90-94	95-99	2000	2001	Cumulative
Alamance Co.	11	51	33	8	7	110
Alexander Co.	1	5	2	1	0	9
Anson Co.	1	14	24	4	4	47
Ashe Co.	0	0	3	0	0	3
Avery Co.	2	1	4	0	0	7
Beaufort Co.	7	35	23	11	9	85
Bertie Co.	3	15	26	7	5	56
Bladen Co.	5	14	12	1	3	35
Brunswick Co.	5	26	22	4	12	69
Buncombe Co.	17	123	153	20	24	337
Burke Co.	5	20	13	1	1	40
Cabarrus Co.	12	35	37	4	4	92
Caldwell Co.	3	11	10	1	3	28
Camden Co.	0	2	4	1	1	8
Carteret Co.	7	20	10	1	1	39
Caswell Co.	0	7	5	1	0	13
Catawba Co.	9	42	29	12	5	97
Chatham Co.	5	8	11	2	1	27
Cherokee Co.	1	3	4	0	1	9
Chowan Co.	1	8	6	1	1	17
Clay Co.	0	0	0	0	1	1
Cleveland Co.	10	26	21	3	6	66
Columbus Co.	10	25	36	3	10	84
Craven Co.	14	53	43	9	9	128
Cumberland Co.	63	180	158	20	32	453
Currituck Co.	1	4	5	0	0	10
Dare Co.	5	7	8	2	0	22
Davidson Co.	14	48	33	5	4	104
Davie Co.	1	5	8	3	1	18
Duplin Co.	9	32	51	4	5	101
Durham Co.	77	369	215	21	38	720
Edgecombe Co.	9	51	64	7	11	142
Forsyth Co.	72	209	222	40	36	579
Franklin Co.	6	16	15	0	5	42
Gaston Co.	18	95	113	20	15	261
Gates Co.	0	0	3	0	1	4
Graham Co.	0	0	1	0	0	1
Granville Co.	8	28	20	6	6	68
Greene Co.	2	7	34	1	5	49
Guilford Co.	73	368	351	40	65	897
Halifax Co.	11	42	52	4	8	117
Harnett Co.	10	34	27	5	8	84
Haywood Co.	5	13	13	0	3	34
Henderson Co.	3	21	34	6	5	69
Hertford Co.	8	12	17	12	5	54
Hoke Co.	3	8	32	3	8	54
Hyde Co.	0	1	4	0	0	5
Iredell Co.	9	25	32	3	2	71
Jackson Co.	1	4	6	1	0	12
Johnston Co.	16	44	39	13	7	119
Jones Co.	0	2	5	0	0	7

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Table 25 cont. : N.C. AIDS Cases (County of AIDS Residence by Year of AIDS Report - 12/31/2001)						
AIDS County	83-89	90-94	95-99	2000	2001	Cumulative
Lee Co.	2	18	15	4	3	42
Lenoir Co.	6	52	88	21	20	187
Lincoln Co.	3	9	8	2	1	23
Macon Co.	0	7	5	0	2	14
Madison Co.	0	2	7	0	0	9
Martin Co.	2	9	21	3	6	41
McDowell Co.	4	2	15	1	2	24
Mecklenburg Co.	174	513	578	68	105	1438
Mitchell Co.	1	2	1	0	2	6
Montgomery Co.	1	5	12	3	2	23
Moore Co.	7	19	15	4	7	52
Nash Co.	13	62	58	9	14	156
New Hanover Co.	28	98	104	17	49	296
Northampton Co.	6	20	21	1	6	54
Onslow Co.	21	44	29	7	15	116
Orange Co.	29	47	24	8	8	116
Pamlico Co.	3	7	2	2	0	14
Pasquotank Co.	4	12	15	5	1	37
Pender Co.	5	21	16	0	6	48
Perquimans Co.	1	2	7	2	0	12
Person Co.	1	11	8	0	2	22
Pitt Co.	24	138	138	22	21	343
Polk Co.	1	6	11	0	0	18
Randolph Co.	9	23	16	2	1	51
Richmond Co.	2	25	17	4	0	48
Robeson Co.	10	59	75	8	27	179
Rockingham Co.	5	29	31	3	5	73
Rowan Co.	13	65	50	9	8	145
Rutherford Co.	3	20	21	4	3	51
Sampson Co.	6	24	27	5	13	75
Scotland Co.	4	28	17	5	2	56
Stanly Co.	1	10	9	2	4	26
Stokes Co.	1	3	7	1	2	14
Surry Co.	3	6	10	1	3	23
Swain Co.	3	7	7	0	1	18
Transylvania Co.	2	11	4	3	1	21
Tyrrell Co.	0	2	1	1	0	4
Union Co.	9	17	35	3	5	69
Vance Co.	5	34	43	3	11	96
Wake Co.	153	355	429	99	90	1126
Warren Co.	0	5	6	1	3	15
Washington Co.	2	18	18	2	2	42
Watauga Co.	3	3	3	0	0	9
Wayne Co.	24	73	75	12	14	198
Wilkes Co.	2	6	7	3	2	20
Wilson Co.	21	58	61	17	20	177
Yadkin Co.	3	0	9	2	0	14
Yancey Co.	1	2	3	0	1	7
Missing	0	1	2	0	3	6
Total	1174	4159	4274	680	871	11158

Table 26 : N.C. Region One Adult/Adolescent HIV Disease Reports (Race/ethnicity)																
Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	39	75.0%	67	52.8%	113	54.6%	120	53.8%	119	52.7%	84	57.9%	67	53.2%	609	55.1%
Black, nH	9	17.3%	38	29.9%	39	18.8%	55	24.7%	45	19.9%	24	16.6%	23	18.3%	233	21.1%
Other/ unk	2	3.8%	3	2.4%	7	3.4%	9	4.0%	8	3.5%	5	3.4%	6	4.8%	40	3.6%
TOTAL	50	96.2%	108	85.0%	159	76.8%	184	82.5%	172	76.1%	113	77.9%	96	76.2%	882	79.7%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	1	1.9%	12	9.4%	28	13.5%	23	10.3%	28	12.4%	20	13.8%	15	11.9%	127	11.5%
Black, nH	1	1.9%	6	4.7%	20	9.7%	13	5.8%	26	11.5%	11	7.6%	15	11.9%	92	8.3%
Other/ unk	0	0.0%	1	0.8%	0	0.0%	3	1.3%	0	0.0%	1	0.7%	0	0.0%	5	0.5%
TOTAL	2	3.8%	19	15.0%	48	23.2%	39	17.5%	54	23.9%	32	22.1%	30	23.8%	224	20.3%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	40	76.9%	79	62.2%	141	68.1%	143	64.1%	147	65.0%	104	71.7%	82	65.1%	736	66.5%
Black, nH	10	19.2%	44	34.6%	59	28.5%	68	30.5%	71	31.4%	35	24.1%	38	30.2%	325	29.4%
Other/ unk	2	3.8%	4	3.1%	7	3.4%	12	5.4%	8	3.5%	6	4.1%	6	4.8%	45	4.1%
TOTAL	52	100%	127	100%	207	100%	223	100%	226	100%	145	100%	126	100%	1,106	100%

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Table 26A : N.C. Region One Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	25	50.0%	38	35.8%	66	42.6%	69	37.7%	69	40.6%	58	51.8%	50	52.6%
IDU	5	10.0%	8	7.5%	15	9.7%	22	12.0%	15	8.8%	10	8.9%	4	4.2%
MSM/IDU	2	4.0%	7	6.6%	11	7.1%	9	4.9%	14	8.2%	5	4.5%	3	3.2%
Blood/+	4	8.0%	3	2.8%	5	3.2%	1	0.5%	2	1.2%	2	1.8%	1	1.1%
Heterosex	1	2.0%	2	1.9%	5	3.2%	7	3.8%	10	5.9%	4	3.6%	1	1.1%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.5%	1	0.6%	0	0.0%	2	2.1%
NIR	2	4.0%	8	7.5%	8	5.2%	11	6.0%	7	4.1%	5	4.5%	6	6.3%
TOTAL	39	78.0%	66	62.3%	110	71.0%	120	65.6%	118	69.4%	84	75.0%	67	70.5%
African American or Black non-Hispanic														
MSM	5	10.0%	7	6.6%	12	7.7%	10	5.5%	13	7.6%	6	5.4%	9	9.5%
IDU	2	4.0%	11	10.4%	18	11.6%	28	15.3%	17	10.0%	3	2.7%	6	6.3%
MSM/IDU	0	0.0%	7	6.6%	3	1.9%	5	2.7%	2	1.2%	4	3.6%	2	2.1%
Blood/+	0	0.0%	1	0.9%	0	0.0%	1	0.5%	1	0.6%	1	0.9%	0	0.0%
Heterosex	0	0.0%	4	3.8%	3	1.9%	5	2.7%	2	1.2%	4	3.6%	1	1.1%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	1.2%	2	1.8%	1	1.1%
NIR	2	4.0%	8	7.5%	3	1.9%	6	3.3%	7	4.1%	4	3.6%	4	4.2%
TOTAL	9	18.0%	38	35.8%	39	25.2%	55	30.1%	44	25.9%	24	21.4%	23	24.2%
Other race/ethnicity														
MSM	1	2.0%	2	1.9%	2	1.3%	2	1.1%	3	1.8%	3	2.7%	2	2.1%
IDU	0	0.0%	0	0.0%	3	1.9%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
MSM/IDU	0	0.0%	0	0.0%	1	0.6%	1	0.5%	1	0.6%	0	0.0%	0	0.0%
Blood/+	1	2.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.5%	1	0.6%	0	0.0%	0	0.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.6%	0	0.0%	1	1.1%
NIR	0	0.0%	0	0.0%	0	0.0%	4	2.2%	2	1.2%	1	0.9%	2	2.1%
TOTAL	2	4.0%	2	1.9%	6	3.9%	8	4.4%	8	4.7%	4	3.6%	5	5.3%
All race/ethnicity														
MSM	31	62.0%	47	44.3%	80	51.6%	81	44.3%	85	50.0%	67	59.8%	61	64.2%
IDU	7	14.0%	19	17.9%	36	23.2%	50	27.3%	32	18.8%	13	11.6%	10	10.5%
MSM/IDU	2	4.0%	14	13.2%	15	9.7%	15	8.2%	17	10.0%	9	8.0%	5	5.3%
Blood/+	5	10.0%	4	3.8%	5	3.2%	2	1.1%	3	1.8%	3	2.7%	1	1.1%
Heterosex	1	2.0%	6	5.7%	8	5.2%	13	7.1%	13	7.6%	8	7.1%	2	2.1%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.5%	4	2.4%	2	1.8%	4	4.2%
NIR	4	8.0%	16	15.1%	11	7.1%	21	11.5%	16	9.4%	10	8.9%	12	12.6%
TOTAL	50	100%	106	100%	155	100%	183	100%	170	100%	112	100%	95	100%

Table 26B : N.C. Region One Female Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	0	0.0%	7	41.2%	9	19.1%	9	23.7%	8	15.1%	4	12.9%	0	0.0%
Blood/+	0	0.0%	2	11.8%	2	4.3%	2	5.3%	2	3.8%	1	3.2%	0	0.0%
Heterosex	0	0.0%	1	5.9%	11	23.4%	8	21.1%	14	26.4%	8	25.8%	8	26.7%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	3	7.9%	1	1.9%	3	9.7%	1	3.3%
NIR	1	50.0%	1	5.9%	6	12.8%	0	0.0%	3	5.7%	4	12.9%	6	20.0%
TOTAL	1	50.0%	11	64.7%	28	59.6%	22	57.9%	28	52.8%	20	64.5%	15	50.0%
African American or Black non-Hispanic														
IDU	0	0.0%	2	11.8%	12	25.5%	6	15.8%	4	7.5%	1	3.2%	3	10.0%
Heterosex	1	50.0%	3	17.6%	4	8.5%	5	13.2%	17	32.1%	3	9.7%	3	10.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	3.2%	3	10.0%
NIR	0	0.0%	0	0.0%	3	6.4%	2	5.3%	4	7.5%	5	16.1%	6	20.0%
TOTAL	1	50.0%	5	29.4%	19	40.4%	13	34.2%	25	47.2%	10	32.3%	15	50.0%
Other race/ethnicity														
IDU	0	0.0%	0	0.0%	0	0.0%	1	2.6%	0	0.0%	0	0.0%	0	0.0%
Blood/+	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	3.2%	0	0.0%
NIR	0	0.0%	1	5.9%	0	0.0%	2	5.3%	0	0.0%	0	0.0%	0	0.0%
TOTAL	0	0.0%	1	5.9%	0	0.0%	3	7.9%	0	0.0%	1	3.2%	0	0.0%
All race/ethnicity														
IDU	0	0.0%	9	52.9%	21	44.7%	16	42.1%	12	22.6%	5	16.1%	3	10.0%
Blood/+	0	0.0%	2	11.8%	2	4.3%	2	5.3%	2	3.8%	2	6.5%	0	0.0%
Heterosex	1	50.0%	4	23.5%	15	31.9%	13	34.2%	31	58.5%	11	35.5%	11	36.7%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	3	7.9%	1	1.9%	4	12.9%	4	13.3%
NIR	1	50.0%	2	11.8%	9	19.1%	4	10.5%	7	13.2%	9	29.0%	12	40.0%
TOTAL	2	100%	17	100%	47	100%	38	100%	53	100%	31	100%	30	100%

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Table 27 : N.C. Region Two Adult/Adolescent HIV Disease Reports (Race/ethnicity)

Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	140	53.0%	155	20.1%	270	22.3%	203	19.8%	127	17.0%	153	21.0%	119	17.2%	1,167	21.5%
Black, nH	97	36.7%	423	54.7%	634	52.4%	514	50.2%	355	47.5%	331	45.3%	308	44.6%	2,662	49.0%
Other/ unk	6	2.3%	9	1.2%	12	1.0%	14	1.4%	15	2.0%	7	1.0%	12	1.7%	75	1.4%
TOTAL	243	92.0%	587	75.9%	916	75.6%	731	71.5%	497	66.5%	491	67.3%	439	63.6%	3,904	71.8%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	5	1.9%	44	5.7%	52	4.3%	56	5.5%	46	6.2%	37	5.1%	39	5.7%	279	5.1%
Black, nH	16	6.1%	140	18.1%	242	20.0%	233	22.8%	195	26.1%	201	27.5%	210	30.4%	1,237	22.7%
Other/ unk	0	0.0%	2	0.3%	1	0.1%	3	0.3%	9	1.2%	1	0.1%	2	0.3%	18	0.3%
TOTAL	21	8.0%	186	24.1%	295	24.4%	292	28.5%	250	33.5%	239	32.7%	251	36.4%	1,534	28.2%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	145	54.9%	199	25.7%	322	26.6%	259	25.3%	173	23.2%	190	26.0%	158	22.9%	1,446	26.6%
Black, nH	113	42.8%	563	72.8%	876	72.3%	747	73.0%	550	73.6%	532	72.9%	518	75.1%	3,899	71.7%
Other/ unk	6	2.3%	11	1.4%	13	1.1%	17	1.7%	24	3.2%	8	1.1%	14	2.0%	93	1.7%
TOTAL	264	100%	773	100%	1,211	100%	1,023	100%	747	100%	730	100%	690	100%	5,438	100%

Table 27A : N.C. Region Two Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	107	45.0%	66	11.3%	166	18.4%	131	18.0%	67	13.8%	95	19.4%	69	15.8%
IDU	3	1.3%	17	2.9%	30	3.3%	12	1.7%	15	3.1%	8	1.6%	5	1.1%
MSM/IDU	9	3.8%	24	4.1%	11	1.2%	4	0.6%	5	1.0%	8	1.6%	6	1.4%
Blood/+	12	5.0%	4	0.7%	11	1.2%	6	0.8%	1	0.2%	1	0.2%	1	0.2%
Heterosex	2	0.8%	5	0.9%	7	0.8%	13	1.8%	14	2.9%	8	1.6%	6	1.4%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	6	0.8%	1	0.2%	4	0.8%	6	1.4%
NIR	4	1.7%	39	6.7%	44	4.9%	30	4.1%	23	4.8%	28	5.7%	26	5.9%
TOTAL	137	57.6%	155	26.6%	269	29.8%	202	27.8%	126	26.0%	152	31.1%	119	27.2%
African American or Black non-Hispanic														
MSM	54	22.7%	75	12.9%	138	15.3%	120	16.5%	92	19.0%	86	17.6%	89	20.3%
IDU	25	10.5%	167	28.6%	217	24.0%	128	17.6%	80	16.5%	67	13.7%	29	6.6%
MSM/IDU	8	3.4%	45	7.7%	31	3.4%	22	3.0%	24	5.0%	14	2.9%	5	1.1%
Blood/+	1	0.4%	3	0.5%	3	0.3%	5	0.7%	3	0.6%	5	1.0%	6	1.4%
Heterosex	3	1.3%	22	3.8%	51	5.6%	66	9.1%	58	12.0%	44	9.0%	61	13.9%
(P)Heterosex	0	0.0%	0	0.0%	1	0.1%	34	4.7%	3	0.6%	24	4.9%	42	9.6%
NIR	5	2.1%	108	18.5%	187	20.7%	136	18.7%	87	18.0%	90	18.4%	76	17.4%
TOTAL	96	40.3%	420	72.0%	628	69.5%	511	70.3%	347	71.7%	330	67.5%	308	70.3%
Other race/ethnicity														
MSM	3	1.3%	3	0.5%	2	0.2%	2	0.3%	3	0.6%	2	0.4%	5	1.1%
IDU	0	0.0%	2	0.3%	2	0.2%	4	0.6%	2	0.4%	0	0.0%	0	0.0%
MSM/IDU	0	0.0%	2	0.3%	0	0.0%	1	0.1%	0	0.0%	2	0.4%	0	0.0%
Blood/+	0	0.0%	0	0.0%	1	0.1%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.1%	3	0.6%	1	0.2%	1	0.2%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.2%	0	0.0%	2	0.5%
NIR	2	0.8%	1	0.2%	1	0.1%	6	0.8%	2	0.4%	2	0.4%	3	0.7%
TOTAL	5	2.1%	8	1.4%	6	0.7%	14	1.9%	11	2.3%	7	1.4%	11	2.5%
All race/ethnicity														
MSM	164	68.9%	144	24.7%	306	33.9%	253	34.8%	162	33.5%	183	37.4%	163	37.2%
IDU	28	11.8%	186	31.9%	249	27.6%	144	19.8%	97	20.0%	75	15.3%	34	7.8%
MSM/IDU	17	7.1%	71	12.2%	42	4.7%	27	3.7%	29	6.0%	24	4.9%	11	2.5%
Blood/+	13	5.5%	7	1.2%	15	1.7%	11	1.5%	4	0.8%	6	1.2%	7	1.6%
Heterosex	5	2.1%	27	4.6%	58	6.4%	80	11.0%	75	15.5%	53	10.8%	68	15.5%
(P)Heterosex	0	0.0%	0	0.0%	1	0.1%	40	5.5%	5	1.0%	28	5.7%	50	11.4%
NIR	11	4.6%	148	25.4%	232	25.7%	172	23.7%	112	23.1%	120	24.5%	105	24.0%
TOTAL	238	100%	583	100%	903	100%	727	100%	484	100%	489	100%	438	100%

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Table 27B : N.C. Region Two Female Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	0	0.0%	17	9.3%	15	5.3%	14	4.9%	4	1.7%	9	3.8%	6	2.4%
Blood/+	2	10.0%	1	0.5%	1	0.4%	2	0.7%	2	0.8%	0	0.0%	1	0.4%
Heterosex	3	15.0%	6	3.3%	12	4.2%	20	6.9%	23	9.5%	13	5.5%	14	5.6%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	6	2.1%	2	0.8%	1	0.4%	7	2.8%
NIR	0	0.0%	20	11.0%	21	7.4%	13	4.5%	15	6.2%	13	5.5%	11	4.4%
TOTAL	5	25.0%	44	24.2%	49	17.2%	55	19.1%	46	19.1%	36	15.3%	39	15.6%
African American or Black non-Hispanic														
IDU	7	35.0%	67	36.8%	59	20.7%	43	14.9%	35	14.5%	25	10.6%	10	4.0%
Blood/+	2	10.0%	1	0.5%	5	1.8%	5	1.7%	9	3.7%	2	0.9%	6	2.4%
Heterosex	4	20.0%	28	15.4%	61	21.4%	98	34.0%	86	35.7%	77	32.8%	86	34.4%
(P)Heterosex	0	0.0%	0	0.0%	1	0.4%	26	9.0%	12	5.0%	17	7.2%	53	21.2%
NIR	2	10.0%	42	23.1%	110	38.6%	58	20.1%	48	19.9%	77	32.8%	55	22.0%
TOTAL	15	75.0%	138	75.8%	236	82.8%	230	79.9%	190	78.8%	198	84.3%	210	84.0%
Other race/ethnicity														
IDU	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.4%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	0	0.0%	2	0.7%	2	0.8%	0	0.0%	1	0.4%
NIR	0	0.0%	0	0.0%	0	0.0%	1	0.3%	2	0.8%	1	0.4%	0	0.0%
TOTAL	0	0.0%	0	0.0%	0	0.0%	3	1.0%	5	2.1%	1	0.4%	1	0.4%
All race/ethnicity														
IDU	7	35.0%	84	46.2%	74	26.0%	57	19.8%	40	16.6%	34	14.5%	16	6.4%
Blood/+	4	20.0%	2	1.1%	6	2.1%	7	2.4%	11	4.6%	2	0.9%	7	2.8%
Heterosex	7	35.0%	34	18.7%	73	25.6%	120	41.7%	111	46.1%	90	38.3%	101	40.4%
(P)Heterosex	0	0.0%	0	0.0%	1	0.4%	32	11.1%	14	5.8%	18	7.7%	60	24.0%
NIR	2	10.0%	62	34.1%	131	46.0%	72	25.0%	65	27.0%	91	38.7%	66	26.4%
TOTAL	20	100%	182	100%	285	100%	288	100%	241	100%	235	100%	250	100%

Table 28 : N.C. Region Three Adult/Adolescent HIV Disease Reports (Race/ethnicity)																
Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	114	57.9%	102	24.1%	170	27.6%	198	24.9%	104	20.3%	109	19.0%	108	19.6%	905	24.7%
Black, nH	66	33.5%	231	54.6%	298	48.5%	384	48.2%	239	46.6%	241	41.9%	241	43.7%	1,700	46.3%
Other/ unk	3	1.5%	9	2.1%	14	2.3%	9	1.1%	10	1.9%	19	3.3%	37	6.7%	101	2.8%
TOTAL	183	92.9%	342	80.9%	482	78.4%	591	74.2%	353	68.8%	369	64.2%	386	69.9%	2,706	73.7%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	114	57.9%	102	24.1%	170	27.6%	198	24.9%	104	20.3%	109	19.0%	108	19.6%	905	24.7%
Black, nH	66	33.5%	231	54.6%	298	48.5%	384	48.2%	239	46.6%	241	41.9%	241	43.7%	1,700	46.3%
Other/ unk	3	1.5%	9	2.1%	14	2.3%	9	1.1%	10	1.9%	19	3.3%	37	6.7%	101	2.8%
TOTAL	183	92.9%	342	80.9%	482	78.4%	591	74.2%	353	68.8%	369	64.2%	386	69.9%	2,706	73.7%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	117	59.4%	113	26.7%	190	30.9%	233	29.3%	126	24.6%	139	24.2%	138	25.0%	1,056	28.8%
Black, nH	77	39.1%	301	71.2%	409	66.5%	554	69.6%	371	72.3%	413	71.8%	368	66.7%	2,493	67.9%
Other/ unk	3	1.5%	9	2.1%	16	2.6%	9	1.1%	16	3.1%	23	4.0%	46	8.3%	122	3.3%
TOTAL	197	100%	423	100%	615	100%	796	100%	513	100%	575	100%	552	100%	3,671	100%

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Table 28A : N.C. Region Three Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	88	48.6%	61	18.0%	111	23.5%	141	24.1%	63	18.2%	66	18.3%	64	17.1%
IDU	3	1.7%	9	2.7%	10	2.1%	10	1.7%	9	2.6%	7	1.9%	7	1.9%
MSM/IDU	12	6.6%	12	3.6%	7	1.5%	8	1.4%	5	1.4%	5	1.4%	2	0.5%
Blood/+	9	5.0%	1	0.3%	11	2.3%	2	0.3%	0	0.0%	4	1.1%	3	0.8%
Heterosex	0	0.0%	0	0.0%	3	0.6%	6	1.0%	11	3.2%	7	1.9%	5	1.3%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	2	0.3%	1	0.3%	2	0.6%	8	2.1%
NIR	0	0.0%	19	5.6%	24	5.1%	28	4.8%	14	4.0%	17	4.7%	19	5.1%
TOTAL	112	61.9%	102	30.2%	166	35.2%	197	33.6%	103	29.8%	108	29.9%	108	28.9%
African American or Black non-Hispanic														
MSM	29	16.0%	64	18.9%	93	19.7%	138	23.5%	74	21.4%	74	20.5%	77	20.6%
IDU	23	12.7%	74	21.9%	105	22.2%	91	15.5%	43	12.4%	37	10.2%	32	8.6%
MSM/IDU	4	2.2%	32	9.5%	19	4.0%	18	3.1%	20	5.8%	6	1.7%	7	1.9%
Blood/+	2	1.1%	3	0.9%	4	0.8%	6	1.0%	1	0.3%	3	0.8%	2	0.5%
Heterosex	5	2.8%	8	2.4%	10	2.1%	41	7.0%	30	8.7%	38	10.5%	34	9.1%
(P)Heterosex	0	0.0%	1	0.3%	1	0.2%	24	4.1%	17	4.9%	16	4.4%	33	8.8%
NIR	3	1.7%	49	14.5%	62	13.1%	63	10.8%	50	14.5%	64	17.7%	55	14.7%
TOTAL	66	36.5%	231	68.3%	294	62.3%	381	65.0%	235	67.9%	238	65.9%	240	64.2%
Other race/ethnicity														
MSM	0	0.0%	1	0.3%	4	0.8%	5	0.9%	1	0.3%	4	1.1%	6	1.6%
IDU	1	0.6%	1	0.3%	3	0.6%	1	0.2%	1	0.3%	1	0.3%	0	0.0%
MSM/IDU	0	0.0%	0	0.0%	1	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Blood/+	1	0.6%	1	0.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.2%	1	0.3%	3	0.8%	2	0.5%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.3%	1	0.3%	6	1.6%
NIR	1	0.6%	2	0.6%	4	0.8%	1	0.2%	4	1.2%	6	1.7%	12	3.2%
TOTAL	3	1.7%	5	1.5%	12	2.5%	8	1.4%	8	2.3%	15	4.2%	26	7.0%
All race/ethnicity														
MSM	117	64.6%	126	37.3%	208	44.1%	284	48.5%	138	39.9%	144	39.9%	147	39.3%
IDU	27	14.9%	84	24.9%	118	25.0%	102	17.4%	53	15.3%	45	12.5%	39	10.4%
MSM/IDU	16	8.8%	44	13.0%	27	5.7%	26	4.4%	25	7.2%	11	3.0%	9	2.4%
Blood/+	12	6.6%	5	1.5%	15	3.2%	8	1.4%	1	0.3%	7	1.9%	5	1.3%
Heterosex	5	2.8%	8	2.4%	13	2.8%	48	8.2%	42	12.1%	48	13.3%	41	11.0%
(P)Heterosex	0	0.0%	1	0.3%	1	0.2%	26	4.4%	19	5.5%	19	5.3%	47	12.6%
NIR	4	2.2%	70	20.7%	90	19.1%	92	15.7%	68	19.7%	87	24.1%	86	23.0%
TOTAL	181	100%	338	100%	472	100%	586	100%	346	100%	361	100%	374	100%

Table 28B : N.C. Region Three Female Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	2	15.4%	4	5.1%	7	5.5%	6	3.0%	3	1.9%	2	1.0%	7	4.3%
Blood/+	0	0.0%	2	2.5%	0	0.0%	1	0.5%	0	0.0%	1	0.5%	2	1.2%
Heterosex	1	7.7%	1	1.3%	5	3.9%	16	7.9%	10	6.4%	18	8.8%	8	5.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.5%	2	1.3%	1	0.5%	6	3.7%
NIR	0	0.0%	4	5.1%	8	6.3%	10	5.0%	6	3.8%	8	3.9%	7	4.3%
TOTAL	3	23.1%	11	13.9%	20	15.6%	34	16.8%	21	13.4%	30	14.7%	30	18.6%
African American or Black non-Hispanic														
IDU	8	61.5%	26	32.9%	26	20.3%	35	17.3%	20	12.7%	18	8.8%	8	5.0%
Blood/+	0	0.0%	2	2.5%	6	4.7%	5	2.5%	1	0.6%	4	2.0%	2	1.2%
Heterosex	2	15.4%	25	31.6%	35	27.3%	75	37.1%	48	30.6%	59	28.9%	37	23.0%
(P)Heterosex	0	0.0%	0	0.0%	1	0.8%	10	5.0%	9	5.7%	17	8.3%	38	23.6%
NIR	0	0.0%	15	19.0%	38	29.7%	43	21.3%	52	33.1%	73	35.8%	40	24.8%
TOTAL	10	76.9%	68	86.1%	106	82.8%	168	83.2%	130	82.8%	171	83.8%	125	77.6%
Other race/ethnicity														
IDU	0	0.0%	0	0.0%	1	0.8%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	1	0.8%	0	0.0%	5	3.2%	1	0.5%	3	1.9%
NIR	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.6%	2	1.0%	3	1.9%
TOTAL	0	0.0%	0	0.0%	2	1.6%	0	0.0%	6	3.8%	3	1.5%	6	3.7%
All race/ethnicity														
IDU	10	76.9%	30	38.0%	34	26.6%	41	20.3%	23	14.6%	20	9.8%	15	9.3%
Blood/+	0	0.0%	4	5.1%	6	4.7%	6	3.0%	1	0.6%	5	2.5%	4	2.5%
Heterosex	3	23.1%	26	32.9%	41	32.0%	91	45.0%	63	40.1%	78	38.2%	48	29.8%
(P)Heterosex	0	0.0%	0	0.0%	1	0.8%	11	5.4%	11	7.0%	18	8.8%	44	27.3%
NIR	0	0.0%	19	24.1%	46	35.9%	53	26.2%	59	37.6%	83	40.7%	50	31.1%
TOTAL	13	100%	79	100%	128	100%	202	100%	157	100%	204	100%	161	100%

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Table 29 : N.C. Region Four Adult/Adolescent HIV Disease Reports (Race/ethnicity)

Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	132	40.7%	173	23.4%	203	22.0%	184	19.4%	122	17.6%	105	16.3%	100	13.2%	1,019	20.3%
Black, nH	151	46.6%	396	53.6%	489	53.0%	504	53.1%	352	50.9%	311	48.1%	379	50.2%	2,582	51.4%
Other/ unk	1	0.3%	5	0.7%	6	0.7%	1	0.1%	4	0.6%	9	1.4%	10	1.3%	36	0.7%
Hispanic	2	0.6%	7	0.9%	7	0.8%	7	0.7%	13	1.9%	20	3.1%	34	4.5%	90	1.8%
TOTAL	286	88.3%	581	78.6%	705	76.4%	696	73.3%	491	71.0%	445	68.9%	523	69.3%	3,727	74.1%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	4	1.2%	13	1.8%	25	2.7%	24	2.5%	23	3.3%	24	3.7%	33	4.4%	146	2.9%
Black, nH	34	10.5%	143	19.4%	192	20.8%	229	24.1%	176	25.4%	172	26.6%	190	25.2%	1,136	22.6%
Other/ unk	0	0.0%	0	0.0%	1	0.1%	0	0.0%	1	0.1%	1	0.2%	2	0.3%	5	0.1%
Hispanic	0	0.0%	2	0.3%	0	0.0%	0	0.0%	1	0.1%	4	0.6%	7	0.9%	14	0.3%
TOTAL	38	11.7%	158	21.4%	218	23.6%	253	26.7%	201	29.0%	201	31.1%	232	30.7%	1,301	25.9%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	136	42.0%	186	25.2%	228	24.7%	208	21.9%	145	21.0%	129	20.0%	133	17.6%	1,165	23.2%
Black, nH	185	57.1%	539	72.9%	681	73.8%	733	77.2%	528	76.3%	483	74.8%	569	75.4%	3,718	73.9%
Other/ unk	1	0.3%	5	0.7%	7	0.8%	1	0.1%	5	0.7%	10	1.5%	12	1.6%	41	0.8%
Hispanic	2	0.6%	9	1.2%	7	0.8%	7	0.7%	14	2.0%	24	3.7%	41	5.4%	104	2.1%
TOTAL	324	100%	739	100%	923	100%	949	100%	692	100%	646	100%	755	100%	5,028	100%

Table 29A : N.C. Region Four Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	105	37.2%	114	19.8%	138	19.7%	114	16.5%	75	15.5%	50	11.4%	55	10.7%
IDU	2	0.7%	9	1.6%	15	2.1%	19	2.8%	7	1.4%	8	1.8%	2	0.4%
MSM/IDU	11	3.9%	28	4.9%	11	1.6%	5	0.7%	12	2.5%	5	1.1%	3	0.6%
Blood/+	11	3.9%	6	1.0%	7	1.0%	6	0.9%	1	0.2%	2	0.5%	2	0.4%
Heterosex	0	0.0%	1	0.2%	10	1.4%	4	0.6%	4	0.8%	6	1.4%	8	1.6%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	5	0.7%	2	0.4%	7	1.6%	6	1.2%
NIR	2	0.7%	13	2.3%	22	3.1%	31	4.5%	20	4.1%	27	6.2%	24	4.7%
TOTAL	131	46.5%	171	29.6%	203	29.0%	184	26.7%	121	25.0%	105	24.0%	100	19.4%
African American or Black non-Hispanic														
MSM	55	19.5%	96	16.6%	151	21.6%	169	24.5%	83	17.1%	88	20.1%	119	23.1%
IDU	58	20.6%	118	20.5%	136	19.4%	136	19.7%	81	16.7%	52	11.9%	37	7.2%
MSM/IDU	18	6.4%	58	10.1%	35	5.0%	25	3.6%	18	3.7%	14	3.2%	10	1.9%
Blood/+	5	1.8%	4	0.7%	12	1.7%	9	1.3%	11	2.3%	3	0.7%	3	0.6%
Heterosex	6	2.1%	18	3.1%	50	7.1%	46	6.7%	35	7.2%	42	9.6%	74	14.4%
(P)Heterosex	0	0.0%	1	0.2%	1	0.1%	14	2.0%	7	1.4%	13	3.0%	32	6.2%
NIR	6	2.1%	101	17.5%	99	14.1%	99	14.3%	115	23.8%	99	22.6%	102	19.8%
TOTAL	148	52.5%	396	68.6%	484	69.1%	498	72.2%	350	72.3%	311	71.0%	377	73.2%
Other race/ethnicity														
MSM	2	0.7%	2	0.3%	7	1.0%	3	0.4%	3	0.6%	4	0.9%	12	2.3%
IDU	0	0.0%	0	0.0%	1	0.1%	1	0.1%	2	0.4%	0	0.0%	4	0.8%
MSM/IDU	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.2%	0	0.0%
Blood/+	1	0.4%	1	0.2%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	1	0.2%	1	0.1%	1	0.1%	2	0.4%	0	0.0%	3	0.6%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	2	0.5%	7	1.4%
NIR	0	0.0%	6	1.0%	4	0.6%	3	0.4%	6	1.2%	15	3.4%	12	2.3%
TOTAL	3	1.1%	10	1.7%	13	1.9%	8	1.2%	13	2.7%	22	5.0%	38	7.4%
All race/ethnicity														
MSM	162	57.4%	212	36.7%	296	42.3%	286	41.4%	161	33.3%	142	32.4%	186	36.1%
IDU	60	21.3%	127	22.0%	152	21.7%	156	22.6%	90	18.6%	60	13.7%	43	8.3%
MSM/IDU	29	10.3%	86	14.9%	46	6.6%	30	4.3%	30	6.2%	20	4.6%	13	2.5%
Blood/+	17	6.0%	11	1.9%	19	2.7%	15	2.2%	12	2.5%	5	1.1%	5	1.0%
Heterosex	6	2.1%	20	3.5%	61	8.7%	51	7.4%	41	8.5%	48	11.0%	85	16.5%
(P)Heterosex	0	0.0%	1	0.2%	1	0.1%	19	2.8%	9	1.9%	22	5.0%	45	8.7%
NIR	8	2.8%	120	20.8%	125	17.9%	133	19.3%	141	29.1%	141	32.2%	138	26.8%
TOTAL	282	100%	577	100%	700	100%	690	100%	484	100%	438	100%	515	100%

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Table 29B : N.C. Region Four Female Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	2	6.1%	8	5.1%	5	2.4%	7	2.8%	8	4.0%	5	2.5%	10	4.3%
Blood/+	0	0.0%	0	0.0%	1	0.5%	0	0.0%	2	1.0%	1	0.5%	0	0.0%
Heterosex	2	6.1%	2	1.3%	6	2.9%	4	1.6%	6	3.0%	11	5.6%	11	4.8%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.4%	0	0.0%	1	0.5%	4	1.7%
NIR	0	0.0%	3	1.9%	13	6.3%	12	4.8%	7	3.5%	4	2.0%	8	3.5%
TOTAL	4	12.1%	13	8.3%	25	12.2%	24	9.6%	23	11.5%	22	11.2%	33	14.3%
African American or Black non-Hispanic														
IDU	18	54.5%	54	34.4%	62	30.2%	43	17.2%	46	23.0%	26	13.2%	25	10.8%
Blood/+	2	6.1%	4	2.5%	1	0.5%	9	3.6%	5	2.5%	4	2.0%	4	1.7%
Heterosex	8	24.2%	33	21.0%	64	31.2%	89	35.6%	53	26.5%	66	33.5%	77	33.3%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	33	13.2%	13	6.5%	9	4.6%	34	14.7%
NIR	1	3.0%	51	32.5%	53	25.9%	52	20.8%	59	29.5%	66	33.5%	50	21.6%
TOTAL	29	87.9%	142	90.4%	180	87.8%	226	90.4%	176	88.0%	171	86.8%	190	82.3%
Other race/ethnicity														
IDU	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.4%
Blood/+	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.4%
Heterosex	0	0.0%	1	0.6%	0	0.0%	0	0.0%	0	0.0%	2	1.0%	1	0.4%
NIR	0	0.0%	1	0.6%	0	0.0%	0	0.0%	1	0.5%	2	1.0%	5	2.2%
TOTAL	0	0.0%	2	1.3%	0	0.0%	0	0.0%	1	0.5%	4	2.0%	8	3.5%
All race/ethnicity														
IDU	20	60.6%	62	39.5%	67	32.7%	50	20.0%	54	27.0%	31	15.7%	36	15.6%
Blood/+	2	6.1%	4	2.5%	2	1.0%	9	3.6%	7	3.5%	5	2.5%	5	2.2%
Heterosex	10	30.3%	36	22.9%	70	34.1%	93	37.2%	59	29.5%	79	40.1%	89	38.5%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	34	13.6%	13	6.5%	10	5.1%	38	16.5%
NIR	1	3.0%	55	35.0%	66	32.2%	64	25.6%	67	33.5%	72	36.5%	63	27.3%
TOTAL	33	100%	157	100%	205	100%	250	100%	200	100%	197	100%	231	100%

Table 30 : N.C. Region Five Adult/Adolescent HIV Disease Reports (Race/ethnicity)

Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct	N	Pct												
White, nH	41	36.6%	53	19.2%	94	18.6%	58	12.2%	54	13.1%	40	13.2%	23	7.8%	363	15.3%
Black, nH	41	36.6%	135	48.9%	229	45.3%	241	50.8%	191	46.2%	134	44.4%	146	49.3%	1,117	47.0%
Am Indian/ AN	2	1.8%	7	2.5%	21	4.2%	16	3.4%	8	1.9%	14	4.6%	13	4.4%	81	3.4%
Other/ unk	4	3.6%	8	2.9%	0	0.0%	2	0.4%	4	1.0%	1	0.3%	5	1.7%	24	1.0%
Hispanic	3	2.7%	2	0.7%	6	1.2%	13	2.7%	14	3.4%	7	2.3%	12	4.1%	57	2.4%
TOTAL	91	81.3%	205	74.3%	350	69.3%	330	69.6%	271	65.6%	196	64.9%	199	67.2%	1,642	69.0%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct	N	Pct												
White, nH	3	2.7%	9	3.3%	22	4.4%	23	4.9%	15	3.6%	19	6.3%	21	7.1%	112	4.7%
Black, nH	18	16.1%	56	20.3%	123	24.4%	108	22.8%	116	28.1%	78	25.8%	64	21.6%	563	23.7%
Am Indian/ AN	0	0.0%	3	1.1%	9	1.8%	9	1.9%	8	1.9%	7	2.3%	4	1.4%	40	1.7%
Other/ unk	0	0.0%	2	0.7%	1	0.2%	1	0.2%	1	0.2%	2	0.7%	1	0.3%	8	0.3%
Hispanic	0	0.0%	1	0.4%	0	0.0%	3	0.6%	2	0.5%	0	0.0%	7	2.4%	13	0.5%
TOTAL	21	18.8%	71	25.7%	155	30.7%	144	30.4%	142	34.4%	106	35.1%	97	32.8%	736	31.0%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct	N	Pct												
White, nH	44	39.3%	62	22.5%	116	23.0%	81	17.1%	69	16.7%	59	19.5%	44	14.9%	475	20.0%
Black, nH	59	52.7%	191	69.2%	352	69.7%	349	73.6%	307	74.3%	212	70.2%	210	70.9%	1,680	70.6%
Am Indian/ AN	2	1.8%	10	3.6%	30	5.9%	25	5.3%	16	3.9%	21	7.0%	17	5.7%	121	5.1%
Other/ unk	4	3.6%	10	3.6%	1	0.2%	3	0.6%	5	1.2%	3	1.0%	6	2.0%	32	1.3%
Hispanic	3	2.7%	3	1.1%	6	1.2%	16	3.4%	16	3.9%	7	2.3%	19	6.4%	70	2.9%
TOTAL	112	100%	276	100%	505	100%	474	100%	413	100%	302	100%	296	100%	2,378	100%

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Table30A : N.C. Region Five Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	24	27.3%	31	15.7%	56	16.2%	18	5.5%	20	7.5%	21	10.7%	13	6.7%
IDU	4	4.5%	1	0.5%	11	3.2%	6	1.8%	9	3.4%	2	1.0%	1	0.5%
MSM/IDU	6	6.8%	4	2.0%	4	1.2%	2	0.6%	1	0.4%	2	1.0%	0	0.0%
Blood/+	4	4.5%	2	1.0%	6	1.7%	0	0.0%	3	1.1%	2	1.0%	0	0.0%
Heterosex	1	1.1%	2	1.0%	2	0.6%	8	2.4%	1	0.4%	4	2.0%	2	1.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	2	0.6%	0	0.0%	1	0.5%	1	0.5%
NIR	1	1.1%	13	6.6%	13	3.8%	22	6.7%	19	7.1%	8	4.1%	6	3.1%
TOTAL	40	45.5%	53	26.9%	92	26.7%	58	17.7%	53	19.9%	40	20.4%	23	11.9%
African American or Black non-Hispanic														
MSM	17	19.3%	39	19.8%	94	27.2%	67	20.4%	65	24.4%	48	24.5%	36	18.6%
IDU	10	11.4%	24	12.2%	35	10.1%	41	12.5%	34	12.8%	19	9.7%	12	6.2%
MSM/IDU	2	2.3%	20	10.2%	11	3.2%	8	2.4%	9	3.4%	4	2.0%	2	1.0%
Blood/+	2	2.3%	3	1.5%	2	0.6%	9	2.7%	3	1.1%	2	1.0%	1	0.5%
Heterosex	1	1.1%	7	3.6%	19	5.5%	26	7.9%	19	7.1%	12	6.1%	30	15.5%
(P)Heterosex	0	0.0%	1	0.5%	0	0.0%	26	7.9%	8	3.0%	11	5.6%	21	10.8%
NIR	9	10.2%	41	20.8%	66	19.1%	62	18.9%	51	19.2%	38	19.4%	43	22.2%
TOTAL	41	46.6%	135	68.5%	227	65.8%	239	72.9%	189	71.1%	134	68.4%	145	74.7%
Other race/ethnicity														
MSM	3	3.4%	2	1.0%	10	2.9%	8	2.4%	7	2.6%	5	2.6%	7	3.6%
IDU	1	1.1%	2	1.0%	10	2.9%	6	1.8%	4	1.5%	7	3.6%	6	3.1%
MSM/IDU	0	0.0%	1	0.5%	1	0.3%	2	0.6%	0	0.0%	1	0.5%	1	0.5%
Blood/+	2	2.3%	1	0.5%	2	0.6%	1	0.3%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	0	0.0%	6	1.8%	4	1.5%	0	0.0%	3	1.5%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.3%	0	0.0%	1	0.5%	4	2.1%
NIR	1	1.1%	3	1.5%	3	0.9%	7	2.1%	9	3.4%	8	4.1%	5	2.6%
TOTAL	7	8.0%	9	4.6%	26	7.5%	31	9.5%	24	9.0%	22	11.2%	26	13.4%
All race/ethnicity														
MSM	44	50.0%	72	36.5%	160	46.4%	93	28.4%	92	34.6%	74	37.8%	56	28.9%
IDU	15	17.0%	27	13.7%	56	16.2%	53	16.2%	47	17.7%	28	14.3%	19	9.8%
MSM/IDU	8	9.1%	25	12.7%	16	4.6%	12	3.7%	10	3.8%	7	3.6%	3	1.5%
Blood/+	8	9.1%	6	3.0%	10	2.9%	10	3.0%	6	2.3%	4	2.0%	1	0.5%
Heterosex	2	2.3%	9	4.6%	21	6.1%	40	12.2%	24	9.0%	16	8.2%	35	18.0%
(P)Heterosex	0	0.0%	1	0.5%	0	0.0%	29	8.8%	8	3.0%	13	6.6%	26	13.4%
NIR	11	12.5%	57	28.9%	82	23.8%	91	27.7%	79	29.7%	54	27.6%	54	27.8%
TOTAL	88	100%	197	100%	345	100%	328	100%	266	100%	196	100%	194	100%

N.C. Region Five Female Adult/Adolescent HIV Disease Reports: Table 30B (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	0	0.0%	1	1.4%	5	3.3%	2	1.4%	3	2.2%	2	2.0%	5	5.2%
Blood/+	1	5.0%	1	1.4%	1	0.7%	4	2.8%	0	0.0%	1	1.0%	0	0.0%
Heterosex	2	10.0%	2	2.9%	7	4.6%	7	5.0%	6	4.4%	5	4.9%	7	7.3%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	5	3.5%	2	1.5%	4	3.9%	1	1.0%
NIR	0	0.0%	5	7.2%	9	5.9%	4	2.8%	4	2.9%	6	5.9%	8	8.3%
TOTAL	3	15.0%	9	13.0%	22	14.4%	22	15.6%	15	11.0%	18	17.6%	21	21.9%
African American or Black non-Hispanic														
IDU	8	40.0%	12	17.4%	21	13.7%	16	11.3%	13	9.6%	3	2.9%	4	4.2%
Blood/+	1	5.0%	4	5.8%	3	2.0%	7	5.0%	5	3.7%	5	4.9%	8	8.3%
Heterosex	7	35.0%	15	21.7%	46	30.1%	25	17.7%	44	32.4%	20	19.6%	23	24.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	28	19.9%	7	5.1%	9	8.8%	11	11.5%
NIR	1	5.0%	24	34.8%	52	34.0%	31	22.0%	42	30.9%	39	38.2%	18	18.8%
TOTAL	17	85.0%	55	79.7%	122	79.7%	107	75.9%	111	81.6%	76	74.5%	64	66.7%
Other race/ethnicity														
IDU	0	0.0%	1	1.4%	4	2.6%	1	0.7%	2	1.5%	2	2.0%	1	1.0%
Blood/+	0	0.0%	0	0.0%	0	0.0%	1	0.7%	1	0.7%	0	0.0%	0	0.0%
Heterosex	0	0.0%	1	1.4%	3	2.0%	4	2.8%	4	2.9%	4	3.9%	5	5.2%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.0%	0	0.0%
NIR	0	0.0%	3	4.3%	2	1.3%	6	4.3%	3	2.2%	1	1.0%	5	5.2%
TOTAL	0	0.0%	5	7.2%	9	5.9%	12	8.5%	10	7.4%	8	7.8%	11	11.5%
All race/ethnicity														
IDU	8	40.0%	14	20.3%	30	19.6%	19	13.5%	18	13.2%	7	6.9%	10	10.4%
Blood/+	2	10.0%	5	7.2%	4	2.6%	12	8.5%	6	4.4%	6	5.9%	8	8.3%
Heterosex	9	45.0%	18	26.1%	56	36.6%	36	25.5%	54	39.7%	29	28.4%	35	36.5%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	33	23.4%	9	6.6%	14	13.7%	12	12.5%
NIR	1	5.0%	32	46.4%	63	41.2%	41	29.1%	49	36.0%	46	45.1%	31	32.3%
TOTAL	20	100%	69	100%	153	100%	141	100%	136	100%	102	100%	96	100%

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Table 31 : N.C. Region Six Adult/Adolescent HIV Disease Reports (Race/ethnicity)

Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	41	27.3%	54	17.6%	88	14.5%	87	14.5%	45	9.2%	48	11.0%	54	12.4%	417	13.8%
Black, nH	84	56.0%	157	51.3%	325	53.6%	310	51.6%	250	50.9%	219	50.3%	234	53.8%	1,579	52.2%
Other/ unk	2	1.3%	1	0.3%	9	1.5%	7	1.2%	13	2.6%	15	3.4%	9	2.1%	56	1.9%
TOTAL	127	84.7%	212	69.3%	422	69.6%	404	67.2%	308	62.7%	282	64.8%	297	68.3%	2,052	67.9%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	4	2.7%	9	2.9%	20	3.3%	17	2.8%	15	3.1%	19	4.4%	12	2.8%	96	3.2%
Black, nH	19	12.7%	85	27.8%	164	27.1%	179	29.8%	164	33.4%	132	30.3%	121	27.8%	864	28.6%
Other/ unk	0	0.0%	0	0.0%	0	0.0%	1	0.2%	4	0.8%	2	0.5%	5	1.1%	12	0.4%
TOTAL	23	15.3%	94	30.7%	184	30.4%	197	32.8%	183	37.3%	153	35.2%	138	31.7%	972	32.1%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct														
White, nH	45	30.0%	63	20.6%	108	17.8%	104	17.3%	60	12.2%	67	15.4%	66	15.2%	513	17.0%
Black, nH	103	68.7%	242	79.1%	489	80.7%	489	81.4%	414	84.3%	351	80.7%	355	81.6%	2,443	80.8%
Other/ unk	2	1.3%	1	0.3%	9	1.5%	8	1.3%	17	3.5%	17	3.9%	14	3.2%	68	2.2%
TOTAL	150	100%	306	100%	606	100%	601	100%	491	100%	435	100%	435	100%	3,024	100%

Table 31A : N.C. Region Six Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	29	23.0%	37	17.6%	56	13.5%	56	14.1%	17	5.6%	23	8.3%	26	8.8%
IDU	4	3.2%	2	1.0%	2	0.5%	5	1.3%	6	2.0%	3	1.1%	8	2.7%
MSM/IDU	0	0.0%	3	1.4%	9	2.2%	6	1.5%	4	1.3%	7	2.5%	5	1.7%
Blood/+	5	4.0%	3	1.4%	3	0.7%	2	0.5%	1	0.3%	0	0.0%	0	0.0%
Heterosex	1	0.8%	4	1.9%	5	1.2%	7	1.8%	5	1.7%	0	0.0%	2	0.7%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	2	0.5%	0	0.0%	1	0.4%	3	1.0%
NIR	2	1.6%	5	2.4%	13	3.1%	9	2.3%	11	3.7%	14	5.1%	10	3.4%
TOTAL	41	32.5%	54	25.7%	88	21.2%	87	22.0%	44	14.6%	48	17.3%	54	18.4%
African American or Black non-Hispanic														
MSM	37	29.4%	56	26.7%	112	26.9%	95	24.0%	69	22.9%	63	22.7%	69	23.5%
IDU	16	12.7%	41	19.5%	77	18.5%	59	14.9%	67	22.3%	28	10.1%	17	5.8%
MSM/IDU	11	8.7%	11	5.2%	17	4.1%	10	2.5%	18	6.0%	9	3.2%	7	2.4%
Blood/+	2	1.6%	1	0.5%	5	1.2%	6	1.5%	4	1.3%	6	2.2%	7	2.4%
Heterosex	4	3.2%	9	4.3%	48	11.5%	63	15.9%	41	13.6%	51	18.4%	54	18.4%
(P)Heterosex	0	0.0%	1	0.5%	1	0.2%	14	3.5%	6	2.0%	22	7.9%	34	11.6%
NIR	13	10.3%	36	17.1%	59	14.2%	57	14.4%	42	14.0%	37	13.4%	45	15.3%
TOTAL	83	65.9%	155	73.8%	319	76.7%	304	76.8%	247	82.1%	216	78.0%	233	79.3%
Other race/ethnicity														
MSM	2	1.6%	1	0.5%	3	0.7%	1	0.3%	0	0.0%	3	1.1%	3	1.0%
IDU	0	0.0%	0	0.0%	1	0.2%	0	0.0%	2	0.7%	0	0.0%	0	0.0%
Blood/+	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.3%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	1	0.2%	1	0.3%	1	0.3%	4	1.4%	0	0.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.3%	2	0.7%	2	0.7%
NIR	0	0.0%	0	0.0%	4	1.0%	3	0.8%	5	1.7%	4	1.4%	2	0.7%
TOTAL	2	1.6%	1	0.5%	9	2.2%	5	1.3%	10	3.3%	13	4.7%	7	2.4%
All race/ethnicity														
MSM	68	54.0%	94	44.8%	171	41.1%	152	38.4%	86	28.6%	89	32.1%	98	33.3%
IDU	20	15.9%	43	20.5%	80	19.2%	64	16.2%	75	24.9%	31	11.2%	25	8.5%
MSM/IDU	11	8.7%	14	6.7%	26	6.3%	16	4.0%	22	7.3%	16	5.8%	12	4.1%
Blood/+	7	5.6%	4	1.9%	8	1.9%	8	2.0%	6	2.0%	6	2.2%	7	2.4%
Heterosex	5	4.0%	13	6.2%	54	13.0%	71	17.9%	47	15.6%	55	19.9%	56	19.0%
(P)Heterosex	0	0.0%	1	0.5%	1	0.2%	16	4.0%	7	2.3%	25	9.0%	39	13.3%
NIR	15	11.9%	41	19.5%	76	18.3%	69	17.4%	58	19.3%	55	19.9%	57	19.4%
TOTAL	126	100%	210	100%	416	100%	396	100%	301	100%	277	100%	294	100%

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Table 31B : N.C. Region Six Female Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	0	0.0%	3	3.2%	7	4.0%	1	0.5%	3	1.7%	2	1.3%	0	0.0%
Blood/+	1	4.3%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
Heterosex	2	8.7%	4	4.3%	8	4.5%	9	4.6%	9	5.0%	12	7.9%	9	6.7%
(P)Heterosex	0	0.0%	0	0.0%	1	0.6%	4	2.0%	0	0.0%	0	0.0%	1	0.7%
NIR	1	4.3%	2	2.2%	2	1.1%	3	1.5%	3	1.7%	4	2.6%	1	0.7%
TOTAL	4	17.4%	9	9.7%	18	10.2%	17	8.7%	15	8.3%	18	11.9%	12	8.9%
African American or Black non-Hispanic														
IDU	8	34.8%	22	23.7%	40	22.7%	23	11.7%	29	16.0%	14	9.3%	12	8.9%
Blood/+	0	0.0%	3	3.2%	4	2.3%	5	2.6%	7	3.9%	6	4.0%	10	7.4%
Heterosex	7	30.4%	33	35.5%	58	33.0%	112	57.1%	74	40.9%	70	46.4%	51	37.8%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	17	8.7%	11	6.1%	16	10.6%	19	14.1%
NIR	4	17.4%	26	28.0%	56	31.8%	21	10.7%	41	22.7%	25	16.6%	28	20.7%
TOTAL	19	82.6%	84	90.3%	158	89.8%	178	90.8%	162	89.5%	131	86.8%	120	88.9%
Other race/ethnicity														
IDU	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.6%	0	0.0%	0	0.0%
Blood/+	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.5%	3	1.7%	2	1.3%	0	0.0%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
NIR	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.7%
TOTAL	0	0.0%	0	0.0%	0	0.0%	1	0.5%	4	2.2%	2	1.3%	3	2.2%
All race/ethnicity														
IDU	8	34.8%	25	26.9%	47	26.7%	24	12.2%	33	18.2%	16	10.6%	12	8.9%
Blood/+	1	4.3%	3	3.2%	4	2.3%	5	2.6%	7	3.9%	6	4.0%	12	8.9%
Heterosex	9	39.1%	37	39.8%	66	37.5%	122	62.2%	86	47.5%	84	55.6%	60	44.4%
(P)Heterosex	0	0.0%	0	0.0%	1	0.6%	21	10.7%	11	6.1%	16	10.6%	21	15.6%
NIR	5	21.7%	28	30.1%	58	33.0%	24	12.2%	44	24.3%	29	19.2%	30	22.2%
TOTAL	23	100%	93	100%	176	100%	196	100%	181	100%	151	100%	135	100%

Table 32 : N.C. Region Seven Adult/Adolescent HIV Disease Reports (Race/ethnicity)

Male																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct
White, nH	37	43.0%	50	38.2%	68	24.5%	54	22.9%	48	23.4%	35	19.6%	41	19.4%	333	25.1%
Black, nH	33	38.4%	51	38.9%	128	46.0%	99	41.9%	83	40.5%	76	42.5%	85	40.3%	555	41.9%
Other/ unk	3	3.5%	2	1.5%	4	1.4%	8	3.4%	7	3.4%	9	5.0%	4	1.9%	37	2.8%
TOTAL	73	84.9%	103	78.6%	200	71.9%	161	68.2%	138	67.3%	120	67.0%	130	61.6%	925	69.8%
Female																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct
White, nH	2	2.3%	7	5.3%	11	4.0%	12	5.1%	13	6.3%	10	5.6%	16	7.6%	71	5.4%
Black, nH	9	10.5%	20	15.3%	67	24.1%	60	25.4%	53	25.9%	44	24.6%	58	27.5%	311	23.5%
Other/ unk	2	2.3%	1	0.8%	0	0.0%	3	1.3%	1	0.5%	5	2.8%	7	3.3%	19	1.4%
TOTAL	13	15.1%	28	21.4%	78	28.1%	75	31.8%	67	32.7%	59	33.0%	81	38.4%	401	30.2%
Both Sexes																
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01		TOTAL	
	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct	N	Pct
White, nH	39	45.3%	57	43.5%	79	28.4%	66	28.0%	61	29.8%	45	25.1%	57	27.0%	404	30.5%
Black, nH	42	48.8%	71	54.2%	195	70.1%	159	67.4%	136	66.3%	120	67.0%	143	67.8%	866	65.3%
Other/ unk	5	5.8%	3	2.3%	4	1.4%	11	4.7%	8	3.9%	14	7.8%	11	5.2%	56	4.2%
TOTAL	86	100%	131	100%	278	100%	236	100%	205	100%	179	100%	211	100%	1,326	100%

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Table 32A : N.C. Region Seven Male Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White non-Hispanic														
MSM	26	36.1%	32	31.4%	33	16.7%	34	21.5%	29	21.2%	21	17.9%	22	17.1%
IDU	2	2.8%	3	2.9%	10	5.1%	6	3.8%	4	2.9%	3	2.6%	4	3.1%
MSM/IDU	2	2.8%	7	6.9%	9	4.5%	1	0.6%	1	0.7%	2	1.7%	3	2.3%
Blood/+	4	5.6%	0	0.0%	3	1.5%	2	1.3%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	2	2.0%	4	2.0%	5	3.2%	7	5.1%	4	3.4%	4	3.1%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.6%	0	0.0%	0	0.0%	3	2.3%
NIR	3	4.2%	6	5.9%	9	4.5%	4	2.5%	7	5.1%	5	4.3%	5	3.9%
TOTAL	37	51.4%	50	49.0%	68	34.3%	53	33.5%	48	35.0%	35	29.9%	41	31.8%
African American or Black non-Hispanic														
MSM	11	15.3%	15	14.7%	33	16.7%	31	19.6%	18	13.1%	22	18.8%	24	18.6%
IDU	13	18.1%	15	14.7%	35	17.7%	17	10.8%	14	10.2%	10	8.5%	10	7.8%
MSM/IDU	1	1.4%	4	3.9%	7	3.5%	2	1.3%	5	3.6%	3	2.6%	1	0.8%
Blood/+	2	2.8%	0	0.0%	2	1.0%	0	0.0%	4	2.9%	0	0.0%	2	1.6%
Heterosex	3	4.2%	5	4.9%	18	9.1%	29	18.4%	29	21.2%	21	17.9%	11	8.5%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	3	1.9%	0	0.0%	6	5.1%	8	6.2%
NIR	2	2.8%	11	10.8%	31	15.7%	15	9.5%	13	9.5%	13	11.1%	29	22.5%
TOTAL	32	44.4%	50	49.0%	126	63.6%	97	61.4%	83	60.6%	75	64.1%	85	65.9%
Other race/ethnicity														
MSM	2	2.8%	0	0.0%	1	0.5%	0	0.0%	1	0.7%	3	2.6%	1	0.8%
IDU	1	1.4%	1	1.0%	1	0.5%	4	2.5%	0	0.0%	0	0.0%	0	0.0%
MSM/IDU	0	0.0%	0	0.0%	0	0.0%	1	0.6%	0	0.0%	0	0.0%	0	0.0%
Blood/+	0	0.0%	0	0.0%	0	0.0%	1	0.6%	0	0.0%	0	0.0%	0	0.0%
Heterosex	0	0.0%	0	0.0%	0	0.0%	1	0.6%	3	2.2%	1	0.9%	1	0.8%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	0.7%	0	0.0%	1	0.8%
NIR	0	0.0%	1	1.0%	2	1.0%	1	0.6%	1	0.7%	3	2.6%	0	0.0%
TOTAL	3	4.2%	2	2.0%	4	2.0%	8	5.1%	6	4.4%	7	6.0%	3	2.3%
All race/ethnicity														
MSM	39	54.2%	47	46.1%	67	33.8%	65	41.1%	48	35.0%	46	39.3%	47	36.4%
IDU	16	22.2%	19	18.6%	46	23.2%	27	17.1%	18	13.1%	13	11.1%	14	10.9%
MSM/IDU	3	4.2%	11	10.8%	16	8.1%	4	2.5%	6	4.4%	5	4.3%	4	3.1%
Blood/+	6	8.3%	0	0.0%	5	2.5%	3	1.9%	4	2.9%	0	0.0%	2	1.6%
Heterosex	3	4.2%	7	6.9%	22	11.1%	35	22.2%	39	28.5%	26	22.2%	16	12.4%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	4	2.5%	1	0.7%	6	5.1%	12	9.3%
NIR	5	6.9%	18	17.6%	42	21.2%	20	12.7%	21	15.3%	21	17.9%	34	26.4%
TOTAL	72	100%	102	100%	198	100%	158	100%	137	100%	117	100%	129	100%

Table 32B : N.C. Region Seven Female Adult/Adolescent HIV Disease Reports (Race/ethnicity by Mode of Transmission)														
Race/ ethnicity	83-89		90-91		92-93		94-95		96-97		98-99		00-01	
	N	Pct												
White, Not Hispanic														
IDU	0	0.0%	2	7.1%	3	4.1%	3	4.1%	4	6.5%	4	6.8%	1	1.3%
Blood/+	0	0.0%	1	3.6%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.3%
Heterosex	2	16.7%	1	3.6%	4	5.4%	8	10.8%	4	6.5%	6	10.2%	6	7.6%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	1	1.4%	0	0.0%	0	0.0%	1	1.3%
NIR	0	0.0%	3	10.7%	3	4.1%	0	0.0%	5	8.1%	0	0.0%	7	8.9%
TOTAL	2	16.7%	7	25.0%	10	13.5%	12	16.2%	13	21.0%	10	16.9%	16	20.3%
African American or Black non-Hispanic														
IDU	4	33.3%	5	17.9%	15	20.3%	14	18.9%	4	6.5%	7	11.9%	7	8.9%
Blood/+	1	8.3%	1	3.6%	3	4.1%	2	2.7%	1	1.6%	1	1.7%	0	0.0%
Heterosex	2	16.7%	6	21.4%	27	36.5%	32	43.2%	34	54.8%	24	40.7%	24	30.4%
(P)Heterosex	0	0.0%	1	3.6%	1	1.4%	2	2.7%	0	0.0%	3	5.1%	8	10.1%
NIR	2	16.7%	7	25.0%	18	24.3%	9	12.2%	9	14.5%	9	15.3%	19	24.1%
TOTAL	9	75.0%	20	71.4%	64	86.5%	59	79.7%	48	77.4%	44	74.6%	58	73.4%
Other race/ethnicity														
IDU	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.7%	1	1.3%
Blood/+	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.7%	0	0.0%
Heterosex	1	8.3%	1	3.6%	0	0.0%	2	2.7%	1	1.6%	2	3.4%	1	1.3%
(P)Heterosex	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	1	1.3%
NIR	0	0.0%	0	0.0%	0	0.0%	1	1.4%	0	0.0%	1	1.7%	2	2.5%
TOTAL	1	8.3%	1	3.6%	0	0.0%	3	4.1%	1	1.6%	5	8.5%	5	6.3%
All race/ethnicity														
IDU	4	33.3%	7	25.0%	18	24.3%	17	23.0%	8	12.9%	12	20.3%	9	11.4%
Blood/+	1	8.3%	2	7.1%	3	4.1%	2	2.7%	1	1.6%	2	3.4%	1	1.3%
Heterosex	5	41.7%	8	28.6%	31	41.9%	42	56.8%	39	62.9%	32	54.2%	31	39.2%
(P)Heterosex	0	0.0%	1	3.6%	1	1.4%	3	4.1%	0	0.0%	3	5.1%	10	12.7%
NIR	2	16.7%	10	35.7%	21	28.4%	10	13.5%	14	22.6%	10	16.9%	28	35.4%
TOTAL	12	100%	28	100%	74	100%	74	100%	62	100%	59	100%	79	100%

2003 NCCPG Epidemiologic Profile

Table 33 : North Carolina Early Syphilis Reports (Reports For Jan.-Jun. of Indicated Years)

RANK	COUNTY	YEAR												PCT CHG 2001- 02
		1997		1998		1999		2000		2001		2002		
		cases	%											
1	ROBESON	45	5.4	33	4.2	52	8.1	75	13	71	15	42	13	-41%
2	MECKLENBURG	89	11	83	11	78	12	56	9.3	63	13	39	12	-38%
3	DURHAM	10	1.2	49	6.3	25	3.9	22	3.7	19	3.9	35	11	84%
4	GUILFORD	118	14	87	11	64	9.9	53	8.8	58	12	30	9	-48%
5	WAKE	66	7.9	37	4.7	47	7.3	36	6	29	5.9	25	7.5	-14%
6	MOORE	5	0.6	3	0.4	10	1.6	14	2.3	9	1.8	19	5.7	111%
7	COLUMBUS	5	0.6	8	1	9	1.4	2	0.3	14	2.9	11	3.3	-21%
8	CUMBERLAND	67	8	42	5.4	23	3.6	36	6	23	4.7	11	3.3	-52%
9	FORSYTH	82	9.8	48	6.2	32	5	32	5.3	21	4.3	11	3.3	-48%
10	ORANGE	5	0.6	29	3.7	9	1.4	2	0.3	6	1.2	10	3	67%
11	NEW HANOVER	2	0.2	12	1.5	14	2.2	22	3.7	20	4.1	7	2.1	-65%
12	WILSON	41	4.9	22	2.8	16	2.5	5	0.8	9	1.8	7	2.1	-22%
13	HOKE	4	0.5	4	0.5	2	0.3	1	0.2	3	0.6	6	1.8	100%
14	JOHNSTON	8	1	4	0.5	1	0.2	9	1.5	9	1.8	5	1.5	-44%
15	WAYNE	15	1.8	34	4.4	4	0.6	4	0.7	7	1.4	5	1.5	-29%
16	ALAMANCE	5	0.6	22	2.8	29	4.5	6	1	4	0.8	4	1.2	0%
17	DAVIDSON	4	0.5	11	1.4	1	0.2	0	0	1	0.2	4	1.2	300%
18	MONTGOMERY	3	0.4	2	0.3	6	0.9	43	7.2	4	0.8	4	1.2	0%
19	ROCKINGHAM	2	0.2	5	0.6	4	0.6	12	2	13	2.7	4	1.2	-69%
20	BRUNSWICK	1	0.1	5	0.6	14	2.2	11	1.8	11	2.2	3	0.9	-73%
21	CHATHAM	5	0.6	6	0.8	13	2	17	2.8	1	0.2	3	0.9	200%
22	GASTON	21	2.5	5	0.6	15	2.3	10	1.7	8	1.6	3	0.9	-63%
23	PENDER	0	0	0	0	2	0.3	2	0.3	4	0.8	3	0.9	-25%
24	BERTIE	1	0.1	0	0	1	0.2	0	0	1	0.2	2	0.6	100%
25	CARTERET	2	0.2	0	0	0	0	1	0.2	0	0	2	0.6	INC
26	CLEVELAND	4	0.5	6	0.8	0	0	5	0.8	1	0.2	2	0.6	100%
27	EDGECOMBE	18	2.2	7	0.9	4	0.6	3	0.5	1	0.2	2	0.6	100%
28	GRANVILLE	0	0	6	0.8	21	3.3	7	1.2	3	0.6	2	0.6	-33%
29	GREENE	2	0.2	3	0.4	2	0.3	1	0.2	0	0	2	0.6	INC
30	HALIFAX	7	0.8	2	0.3	3	0.5	1	0.2	0	0	2	0.6	INC
31	LENOIR	3	0.4	7	0.9	3	0.5	2	0.3	1	0.2	2	0.6	100%
32	PITT	6	0.7	5	0.6	11	1.7	13	2.2	2	0.4	2	0.6	0%
33	RANDOLPH	3	0.4	6	0.8	18	2.8	14	2.3	2	0.4	2	0.6	0%
34	SAMPSON	8	1	6	0.8	0	0	1	0.2	2	0.4	2	0.6	0%
35	VANCE	4	0.5	9	1.2	5	0.8	5	0.8	5	1	2	0.6	-60%
36	BLADEN	2	0.2	2	0.3	4	0.6	4	0.7	1	0.2	1	0.3	0%
37	BUNCOMBE	2	0.2	2	0.3	0	0	2	0.3	3	0.6	1	0.3	-67%
38	CABARRUS	6	0.7	2	0.3	1	0.2	3	0.5	1	0.2	1	0.3	0%
39	CALDWELL	0	0	6	0.8	1	0.2	0	0	0	0	1	0.3	INC
40	CASWELL	1	0.1	3	0.4	3	0.5	6	1	2	0.4	1	0.3	-50%
41	CATAWBA	16	1.9	9	1.2	12	1.9	3	0.5	0	0	1	0.3	INC

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Table 33 : North Carolina Early Syphilis Reports (Reports For Jan.-Jun. of Indicated Years)

RANK	COUNTY	YEAR												PCT CHG 2001- 02
		1997		1998		1999		2000		2001		2002		
		cases	%											
42	CRAVEN	4	0.5	1	0.1	4	0.6	5	0.8	2	0.4	1	0.3	-50%
43	HARNETT	17	2	1	0.1	12	1.9	0	0	4	0.8	1	0.3	-75%
44	HERTFORD	0	0	0	0	1	0.2	0	0	0	0	1	0.3	INC
45	IREDELL	16	1.9	26	3.3	11	1.7	8	1.3	4	0.8	1	0.3	-75%
46	JONES	0	0	1	0.1	0	0	0	0	0	0	1	0.3	INC
47	LEE	14	1.7	6	0.8	4	0.6	2	0.3	2	0.4	1	0.3	-50%
48	PASQUOTANK	9	1.1	6	0.8	3	0.5	3	0.5	3	0.6	1	0.3	-67%
49	PERSON	0	0	1	0.1	0	0	0	0	3	0.6	1	0.3	-67%
50	RICHMOND	10	1.2	7	0.9	2	0.3	12	2	7	1.4	1	0.3	-86%
51	ROWAN	5	0.6	4	0.5	4	0.6	0	0	2	0.4	1	0.3	-50%
52	SCOTLAND	2	0.2	4	0.5	2	0.3	1	0.2	0	0	1	0.3	INC
53	ALEXANDER	0	0	0	0	0	0	1	0.2	0	0	0	0	
54	ALLEGHANY	0	0	0	0	0	0	0	0	0	0	0	0	
55	ANSON	4	0.5	4	0.5	1	0.2	1	0.2	1	0.2	0	0	-100%
56	ASHE	0	0	0	0	0	0	0	0	0	0	0	0	
57	AVERY	0	0	0	0	0	0	0	0	0	0	0	0	
58	BEAUFORT	5	0.6	4	0.5	1	0.2	2	0.3	1	0.2	0	0	-100%
59	BURKE	0	0	20	2.6	0	0	2	0.3	2	0.4	0	0	-100%
60	CAMDEN	0	0	0	0	0	0	0	0	0	0	0	0	
61	CHEROKEE	0	0	1	0.1	0	0	0	0	0	0	0	0	
62	CHOWAN	0	0	0	0	0	0	0	0	2	0.4	0	0	-100%
63	CLAY	0	0	0	0	0	0	0	0	0	0	0	0	
64	CURRITUCK	0	0	2	0.3	0	0	0	0	0	0	0	0	
65	DARE	0	0	0	0	0	0	0	0	1	0.2	0	0	-100%
66	DAVIE	0	0	1	0.1	2	0.3	0	0	0	0	0	0	
67	DUPLIN	2	0.2	6	0.8	1	0.2	0	0	1	0.2	0	0	-100%
68	FRANKLIN	0	0	1	0.1	1	0.2	2	0.3	3	0.6	0	0	-100%
69	GATES	1	0.1	0	0	4	0.6	0	0	0	0	0	0	
70	GRAHAM	0	0	0	0	0	0	0	0	0	0	0	0	
71	HAYWOOD	0	0	2	0.3	0	0	0	0	0	0	0	0	
72	HENDERSON	0	0	0	0	0	0	0	0	0	0	0	0	
73	HYDE	7	0.8	0	0	0	0	0	0	0	0	0	0	
74	JACKSON	0	0	2	0.3	0	0	0	0	0	0	0	0	
75	LINCOLN	0	0	3	0.4	2	0.3	0	0	1	0.2	0	0	-100%
76	MACON	0	0	0	0	0	0	0	0	0	0	0	0	
77	MADISON	0	0	0	0	0	0	0	0	0	0	0	0	
78	MARTIN	2	0.2	1	0.1	1	0.2	1	0.2	0	0	0	0	
79	MCDOWELL	0	0	0	0	0	0	0	0	2	0.4	0	0	-100%
80	MITCHELL	0	0	0	0	0	0	0	0	0	0	0	0	
81	NASH	20	2.4	2	0.3	4	0.6	5	0.8	4	0.8	0	0	-100%
82	NORTHAMPTON	2	0.2	3	0.4	0	0	0	0	0	0	0	0	

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Table 33 : North Carolina Early Syphilis Reports (Reports For Jan.-Jun. of Indicated Years)														
		YEAR												PCT CHG 2001- 02
		1997		1998		1999		2000		2001		2002		
		cases	%											
RANK	COUNTY													
83	ONSLOW	1	0.1	5	0.6	10	1.6	3	0.5	1	0.2	0	0	-100%
84	PAMLICO	1	0.1	0	0	0	0	0	0	0	0	0	0	
85	PERQUIMANS	0	0	0	0	0	0	0	0	0	0	0	0	
86	POLK	0	0	0	0	0	0	0	0	0	0	0	0	
87	RUTHERFORD	1	0.1	2	0.3	2	0.3	2	0.3	0	0	0	0	
88	STANLY	11	1.3	8	1	8	1.2	2	0.3	1	0.2	0	0	-100%
89	STOKES	0	0	1	0.1	0	0	1	0.2	0	0	0	0	
90	SURRY	0	0	0	0	0	0	0	0	0	0	0	0	
91	SWAIN	0	0	0	0	0	0	0	0	0	0	0	0	
92	TRANSYLVANIA	0	0	0	0	0	0	0	0	0	0	0	0	
93	TYRRELL	0	0	0	0	0	0	0	0	0	0	0	0	
94	UNION	7	0.8	6	0.8	3	0.5	3	0.5	3	0.6	0	0	-100%
95	WARREN	3	0.4	17	2.2	1	0.2	0	0	2	0.4	0	0	-100%
96	WASHINGTON	2	0.2	0	0	0	0	1	0.2	4	0.8	0	0	-100%
97	WATAUGA	0	0	0	0	0	0	0	0	0	0	0	0	
98	WILKES	0	0	0	0	0	0	0	0	0	0	0	0	
99	YADKIN	0	0	0	0	1	0.2	0	0	1	0.2	0	0	-100%
100	YANCEY	0	0	0	0	0	0	1	0.2	0	0	0	0	
	UNKNOWN	0	0	0	0	1	0.2	0	0	0	0	0	0	
	TOTAL	834	100	780	100	645	100	599	100	489	100	332	100	-32%

RANK is the relative ranking (descending numbers of cases) of the county for the 2002 reports. % is the percent contribution by the county for the year indicated.

2003 NCCPG Epidemiologic Profile

**Table 34 : North Carolina Early Syphilis Reports
(Percent Of Cases Reported by County for Jan-June 2002**

		2002		Cumulative				2002		Cumulative	
RANK	COUNTY	Cases	%	Cases	%	RANK	COUNTY	Cases	%	Cases	%
1	ROBESON	42	12.7	42	12.7	51	ROWAN	1	0.3	331	99.7
2	MECKLENBURG	39	11.7	81	24.4	52	SCOTLAND	1	0.3	332	100
3	DURHAM	35	10.5	116	34.9	53	ALEXANDER	0	0	332	100
4	GUILFORD	30	9.0	146	44.0	54	ALLEGHANY	0	0	332	100
5	WAKE	25	7.5	171	51.5	55	ANSON	0	0	332	100
6	MOORE	19	5.7	190	57.2	56	ASHE	0	0	332	100
7	COLUMBUS	11	3.3	201	60.5	57	AVERY	0	0	332	100
8	CUMBERLAND	11	3.3	212	63.9	58	BEAUFORT	0	0	332	100
9	FORSYTH	11	3.3	223	67.2	59	BURKE	0	0	332	100
10	ORANGE	10	3.0	233	70.2	60	CAMDEN	0	0	332	100
11	NEW HANOVER	7	2.1	240	72.3	61	CHEROKEE	0	0	332	100
12	WILSON	7	2.1	247	74.4	62	CHOWAN	0	0	332	100
13	HOKE	6	1.8	253	76.2	63	CLAY	0	0	332	100
14	JOHNSTON	5	1.5	258	77.7	64	CURRITUCK	0	0	332	100
15	WAYNE	5	1.5	263	79.2	65	DARE	0	0	332	100
16	ALAMANCE	4	1.2	267	80.4	66	DAVIE	0	0	332	100
17	DAVIDSON	4	1.2	271	81.6	67	DUPLIN	0	0	332	100
18	MONTGOMERY	4	1.2	275	82.8	68	FRANKLIN	0	0	332	100
19	ROCKINGHAM	4	1.2	279	84.0	69	GATES	0	0	332	100
20	BRUNSWICK	3	0.9	282	84.9	70	GRAHAM	0	0	332	100
21	CHATHAM	3	0.9	285	85.8	71	HAYWOOD	0	0	332	100
22	GASTON	3	0.9	288	86.7	72	HENDERSON	0	0	332	100
23	PENDER	3	0.9	291	87.7	73	HYDE	0	0	332	100
24	BERTIE	2	0.6	293	88.3	74	JACKSON	0	0	332	100
25	CARTERET	2	0.6	295	88.9	75	LINCOLN	0	0	332	100
26	CLEVELAND	2	0.6	297	89.5	76	MACON	0	0	332	100
27	EDGECOMBE	2	0.6	299	90.1	77	MADISON	0	0	332	100
28	GRANVILLE	2	0.6	301	90.7	78	MARTIN	0	0	332	100
29	GREENE	2	0.6	303	91.3	79	MCDOWELL	0	0	332	100
30	HALIFAX	2	0.6	305	91.9	80	MITCHELL	0	0	332	100
31	LENOIR	2	0.6	307	92.5	81	NASH	0	0	332	100
32	PITT	2	0.6	309	93.1	82	NORTHAMPTON	0	0	332	100
33	RANDOLPH	2	0.6	311	93.7	83	ONSLow	0	0	332	100
34	SAMPSON	2	0.6	313	94.3	84	PAMLICO	0	0	332	100
35	VANCE	2	0.6	315	94.9	85	PERQUIMANS	0	0	332	100
36	BLADEN	1	0.3	316	95.2	86	POLK	0	0	332	100
37	BUNCOMBE	1	0.3	317	95.5	87	RUTHERFORD	0	0	332	100
38	CABARRUS	1	0.3	318	95.8	88	STANLY	0	0	332	100
39	CALDWELL	1	0.3	319	96.1	89	STOKES	0	0	332	100
40	CASWELL	1	0.3	320	96.4	90	SURRY	0	0	332	100
41	CATAWBA	1	0.3	321	96.7	91	SWAIN	0	0	332	100
42	CRAVEN	1	0.3	322	97.0	92	TRANSYLVANIA	0	0	332	100
43	HARNETT	1	0.3	323	97.3	93	TYRRELL	0	0	332	100
44	HERTFORD	1	0.3	324	97.6	94	UNION	0	0	332	100
45	IREDELL	1	0.3	325	97.9	95	WARREN	0	0	332	100
46	JONES	1	0.3	326	98.2	96	WASHINGTON	0	0	332	100
47	LEE	1	0.3	327	98.5	97	WATAUGA	0	0	332	100
48	PASQUOTANK	1	0.3	328	98.8	98	WILKES	0	0	332	100
49	PERSON	1	0.3	329	99.1	99	YADKIN	0	0	332	100
50	RICHMOND	1	0.3	330	99.4	100	YANCEY	0	0	332	100

**Table 35 : North Carolina Early Syphilis Reports
(Age Rate Ratios (20-29 Referent Group))**

EARLY SYPHILIS					
Age Group	Year of Report				
	1997	1998	1999	2000	2001
0-12	0.0	0.0	0.0	0.0	0.0
13-19	0.4	0.4	0.3	0.4	0.4
20-29	1.0	1.0	1.0	1.0	1.0
30-39	1.0	0.9	0.8	1.1	1.2
40-49	0.5	0.5	0.5	0.6	0.7
50 +	0.1	0.1	0.1	0.1	0.2
GONORRHEA					
Age Group	Year of Report				
	1997	1998	1999	2000	2001
0-12	0.0	0.0	0.0	0.0	0.0
13-19	1.0	0.9	0.8	0.8	0.9
20-29	1.0	1.0	1.0	1.0	1.0
30-39	0.3	0.3	0.3	0.3	0.3
40-49	0.1	0.1	0.1	0.1	0.1
50 +	0.0	0.0	0.0	0.0	0.0
CHLAMYDIA					
Age Group	Year of Report				
	1997	1998	1999	2000	2001
0-12	0.0	0.0	0.0	0.0	0.0
13-19	1.4	1.4	1.3	1.3	1.2
20-29	1.0	1.0	1.0	1.0	1.0
30-39	0.1	0.1	0.1	0.1	0.1
40-49	0.0	0.0	0.0	0.0	0.0
50 +	0.0	0.0	0.0	0.0	0.0
HIV DISEASE					
Age Group	Year of Report				
	1997	1998	1999	2000	2001
0-12	0.0	0.0	0.0	0.0	0.0
13-19	0.2	0.2	0.2	0.2	0.1
20-29	1.0	1.0	1.0	1.0	1.0
30-39	1.5	1.4	1.7	1.6	1.5
40-49	1.0	1.0	1.2	1.2	1.1
50 +	0.2	0.2	0.3	0.3	0.3

Rate ratios calculated by dividing the rate/100,000 for age group of interest by the referent rate/100,000.

HIV/STD Prevention and Care Branch
1902 Mail Service Center
Raleigh, North Carolina 27699-1902
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www.epi.state.nc.us/epi/hiv/



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